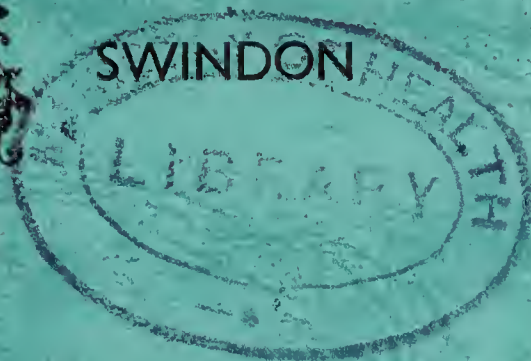


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BOROUGH



of



# Annual Report

of the

**Medical Officer of Health**

**FOR THE YEAR 1953**



Report of the  
**CHIEF SANITARY INSPECTOR**  
**FOR THE YEAR 1953**

Report of the  
**PRINCIPAL BOROUGH**  
**SCHOOL MEDICAL OFFICER**  
**FOR THE YEAR 1953**

Report on the  
**SCHOOL DENTAL SERVICES**  
**FOR THE YEAR 1953**

Copy of Report of the  
**AREA MEDICAL OFFICER**  
**FOR THE YEAR 1953**





**BOROUGH OF SWINDON**  
**COMPOSITION OF COMMITTEE AND STAFF**  
**as at 31st December, 1953.**

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**HEALTH AND WELFARE COMMITTEE**  
**HIS WORSHIP THE MAYOR**  
**(Alderman HAROLD WHITESIDE GARDNER)**

**Chairman:** Alderman N. V. TOZE

**Vice-Chairman:** Councillor W. J. DAVIS.

**MEMBERS:**

Alderman	Miss E. C. MILLIN	Councillor	J. GRETTY
„	Mrs. E. M. SIMPKINS	„	Mrs. L. A. GRIFFIN
„	M. WEBB	„	R. S. J. HONEY
Councillor	A. T. E. BECK	„	H. G. LEWIS
„	A. M. BENNETT	„	Mrs. L. R. LOCK
„	F. E. BISHOP	„	L. C. MOBEY
„	Miss V. L. M. CARTER	„	L. J. NEWMAN
„	Miss C. M. GAPPER	„	Mrs. K. M. TOMKINS

**TOWN CLERK**

D. MURRAY JOHN, Esq., O.B.E., B.A.

**PUBLIC HEALTH STAFF**

**31st December, 1953**

Medical Officer of Health	-	JAMES URQUHART, M.B., Ch.B., D.P.H.
Deputy Medical Officer of Health	- -	C. W. SHEARER, M.B., Ch.B., D.P.H. (commenced 28th April, 1953)
Assistant Medical Officer of Health	- -	S. B. S. SMITH, L.M.S.S.A., D.T.M. & H.
Senior Sanitary Inspector	-	H. A. BANWELL, C.R.S.I., M.S.I.A., C.M. & F.I.
Senior Additional Sanitary Inspector	- -	R. A. LAW, Cert.S.I.J.B., M.S.I.A., C.M. & F.I.
Additional Sanitary Inspectors	- -	P. M. DALE, Cert.S.I.J.B., M.S.I.A., C.M. & F.I.
		J. M. A. FABEL, Cert.S.I.J.B., M.S.I.A., C.M. & F.I.
		E. W. KNOWLES, Cert.S.I.J.B., M.S.I.A., C.M. & F.I.
		L. HOPES, Cert.S.I.J.B., M.S.I.A., C.M. & F.I.
Dental Surgeon	- -	
Senior Health Visitor and School Nurse	- -	Miss W. R. BURROWS

Health Visitors and School Nurses	-	-	-	Mrs. B. E. BELL Mrs. E. A. BUTT Miss A. H. HAWKINS Miss W. PARKINS Mrs. M. A. POWELL Miss C. J. THORN Mrs. J. D. WALL
Domiciliary Midwives	-			Miss J. E. BLOCK Mrs. Z. BARRINGTON EVANS Mrs. M. MAYNARD Mrs. H. M. MORTIMORE Miss N. NEAL Mrs. G. M. TAYLOR
Matron, Day Nursery	-			Mrs. A. DAVIES, S. R.N.
District Nurses	-			Miss E. E. M. BARKER Mrs. A. B. BUSHNELL Mrs. E. M. EGGERS Miss E. M. HULBERT Mrs. V. M. SELLWOOD Miss L. M. SHEPPARD
Administrative Assistant	-			J. W. DAY
Senior Clerks	-	-		J. R. PELL Miss L. M. RAWLINGS
Assistant Clerks	-	-		A. H. BUTLER F. C. MOSS W. H. PAUL T. C. POPE (H.M. Forces) Miss A. L. FISHER Mrs. E. E. C. FURLEY Mrs. E. M. MELHUISE Miss P. A. MOLDEN Mrs. J. PEYTON Mrs. V. M. VOCKINGS
Disinfector	-	-		A. C. MOLE
Rodent Operators	-	-		H. SNELL



**ANNUAL REPORT**  
**of the**  
**MEDICAL OFFICER OF HEALTH (1953)**

**To the Mayor,  
Aldermen and Councillors of the Borough of Swindon.**

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present the Annual Report on the work of the Health Department for the year 1953.

The report has been prepared on the lines suggested by the Ministry of Health circular 170/47.

Although this report deals only with the functions of the Department as the Local Sanitary Authority of a Municipal Borough, I am indebted to the County Medical Officer, Dr. C. D. L. Lycett, for his permission to append the report on Part III Services under the National Health Services Act, 1946 which are delegated to the Swindon Area Sub-Committee. The work of the Department in connection with the School Health Services is included as a separate report. Having these three separate reports under one cover will, I trust, make it more convenient for the Council to gain an overall picture of the health of the Borough.

The work of the Department insofar as it concerns sanitary inspectors has increased considerably with the full functioning of the Ministry of Food slaughterhouse in Ladder Lane. For most of the year this abattoir has required two full time meat inspectors, and week-end working as well as long hours have added to our difficulties. It is obvious, therefore that unless additional sanitary inspectors are recruited, some of the sanitary duties will have to be neglected. For instance, it has been impossible, with the staff available, to make the progress we had hoped for in the detailed survey of unfit and substandard properties. Details of the work carried out by the sanitary inspectors are given in the report of the Senior Sanitary Inspector.

During the year, the housing estate at Penhill has grown rapidly, and at the end of the year 527 houses were completed and occupied. So far, only new houses have been provided at Penhill. However, to achieve an integrated healthy and happy community of character, more is needed than dwelling houses. Facilities must be provided for recreation, religious worship, shopping, health services, etc., and I trust that in the development of the new estates, the provision of such amenities will be given due priority. It is gratifying that the first step in this direction has already been taken in the formation

of the Social Development Section of the Town Clerk's Department. Unfortunately, new estate development does not mean that families from substandard houses are rehoused there and the bad property vacated. Certainly, many of the families now in Penhill did come from poor, congested houses in the central part of the town, where they were living in rooms, but the houses from which they come continue to be occupied. Many problems arise in considering the closure or demolition of substandard property, especially with regard to the financial implications of rehousing. One cannot anticipate, for instance, that old age pensioners who have been paying rents of under 10s/- per week will be willing to pay the high rents charged for new council houses. Legislation now before parliament will, it is hoped, help Local Authorities to resolve many of the difficulties in connection with slum clearance and rehousing of their people.

From a study of the statistical tables, graphs and histograms in the report, it will be seen that Swindon compares favourably with the country as a whole with regard to the health of its population. The rate of employment is high and the social circumstances of the great majority of the population are good.

In conclusion, I would like to express my thanks to the members of the staff of the Health Department for their loyalty and service throughout the year, and to officers and staff of the other departments of the Corporation and to the voluntary associations who have co-operated in so many ways.

I am,

Your obedient servant,

JAMES URQUHART,

Medical Officer of Health.

CIVIC OFFICES,  
SWINDON.

## WATER SUPPLIES

The Borough water supplies continue to be satisfactory in quality and quantity.

Forty-one bacteriological and eleven chemical analyses from various dwelling-houses proved to be entirely satisfactory.

Four chemical and four bacteriological samples were taken of raw water and four chemical and four bacteriological samples were taken of the water going into the supply. In each case the Public Analyst reported that the water was satisfactory for a public supply.

Some 21,225 houses, with a population of 69,030 have water laid on from the public mains.

Twenty-seven dwellings, housing eighty-one people, are supplied from stand-pipes, and a further fourteen dwellings, housing forty-nine people, are not connected to the public mains.



## EXTRACTS FROM VITAL STATISTICS — 1953

Area of the Borough (acres)	-	-	-	6,361
Estimated total population mid-year 1953	-	-	-	69,030
Live Births—Legitimate	-	-	1,090	
Illegitimate	-	-	58	
<b>Total</b>	-	-	————	1,148
Live birth rate per 1,000 population	-	-	-	16.6
Still birth rate per 1,000 population	-	-	-	0.35
Stillbirths	-	-	-	24
Still birth rate per 1,000 total births	-	-	-	20.48
Deaths at all ages—Males	-	-	426	
Females	-	-	376	
<b>Total</b>	-	-	————	802
Death rate per 1,000 population	-	-	-	11.6
Deaths from Cancer	-	-	145	
Deaths from Respiratory Diseases	-	-	107	
Deaths from Pulmonary Tuberculosis	-	-	14	
Deaths from Influenza	-	-	9	
Deaths from vascular and heart diseases	-	-	250	
Deaths from infective and parasitic diseases	-	-	8	
Deaths from all other causes	-	-	269	
<b>Total</b>	-	-	————	802
Deaths of infants under the age of 1 year	-	-	-	21

## GENERAL STATISTICS AND SOCIAL CONDITIONS

The population of the Borough of Swindon in 1901 was 50,771. At the 1931 census it was 62,407. The 1953 mid-year estimated population of Swindon was 69,030, but the actual population at the 1951 census was 68,932.

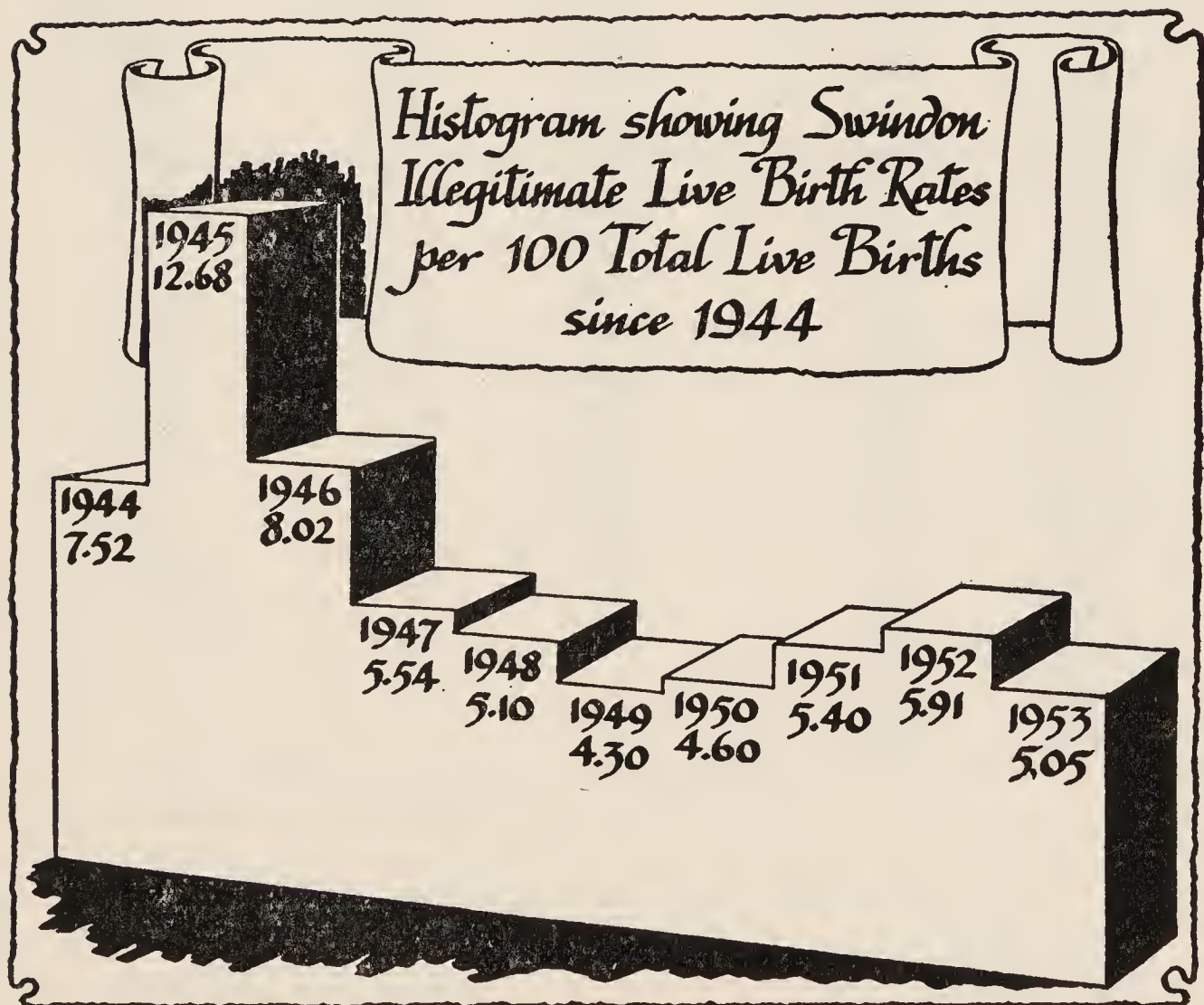


## BIRTHS AND BIRTH RATES

The following table gives the number of legitimate and illegitimate live births in Swindon during 1952 and 1953.

	1952			1953		
	MALES	FEMALES	TOTAL	MALES	FEMALES	TOTAL
Legitimate -	501	486	987	550	540	1090
Illegitimate -	28	34	62	31	27	58
TOTALS -	529	520	1,049	581	567	1148

The illegitimate births formed 5.05% of the total live births in Swindon during 1953 and 5.9% during 1952.

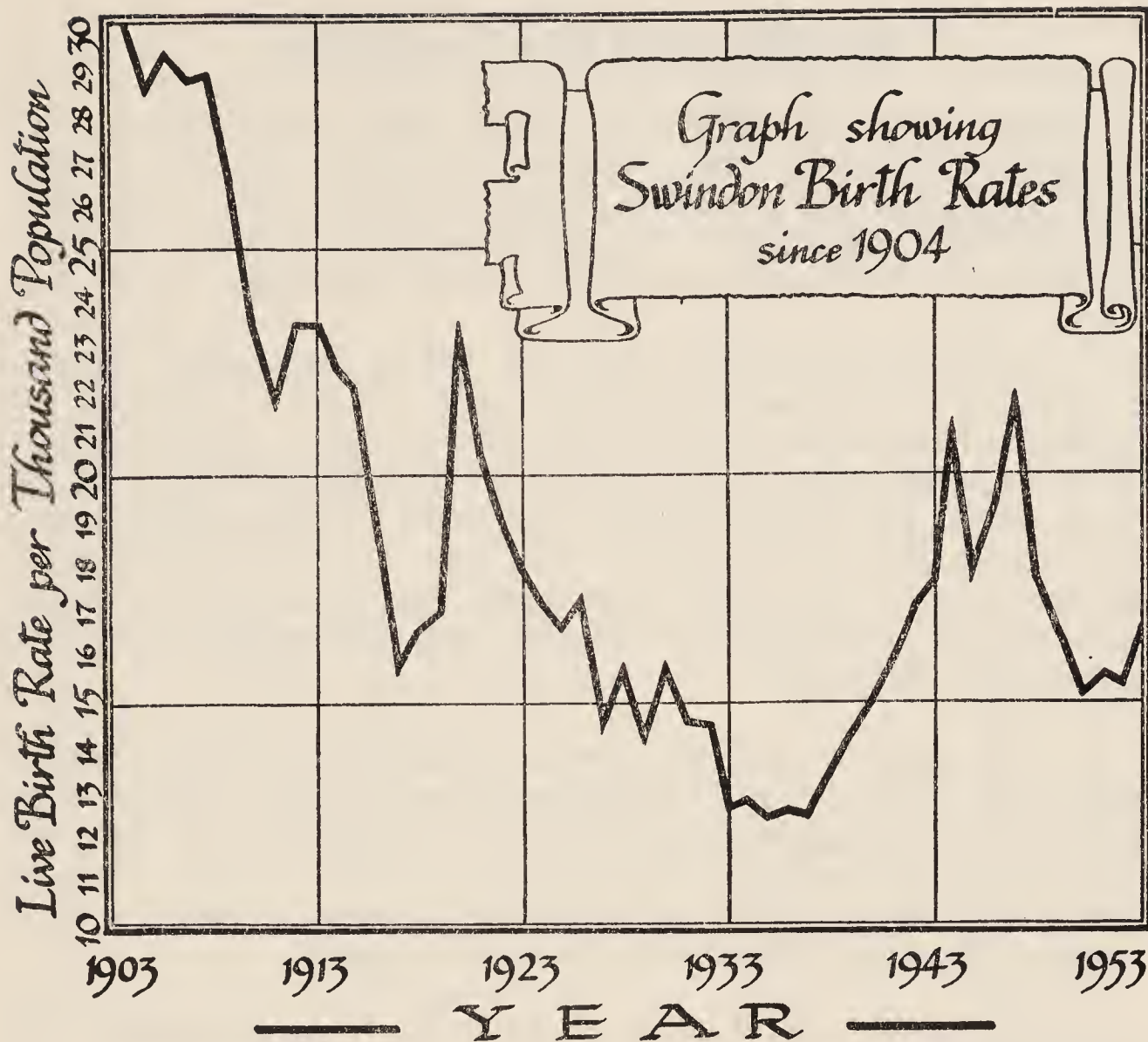


The Swindon live birth rate per 1,000 population was 16.6 during 1953 as compared with 15.2 during 1952.

The trend in birth rates in Swindon since 1904 is illustrated by the following table and graph:—

**TABLE SHOWING SWINDON LIVE BIRTH RATES FROM 1904 to 1953, with COMPARATIVE LIVE BIRTH RATES FOR ENGLAND AND WALES SINCE 1931:—**

<b>Year</b>	<b>Swindon Birth Rate</b>	<b>Year</b>	<b>Swindon Birth Rate</b>	<b>England &amp; Wales; Birth Rate</b>
1904	30.0	1931	14.5	15.8
1905	28.4	1932	14.3	15.3
1906	29.4	1933	12.5	14.4
1907	28.8	1934	12.7	14.8
1908	28.9	1935	12.3	14.7
1909	26.5	1936	12.4	14.8
1910	23.4	1937	12.4	14.9
1911	21.6	1938	13.1	15.1
1912	23.4	1939	14.0	15.0
1913	23.4	1940	14.8	14.6
1914	22.5	1941	15.8	13.9
1915	22.0	1942	17.0	15.6
1916	18.9	1943	17.6	16.2
1917	15.5	1944	21.0	17.7
1918	16.5	1945	17.7	15.9
1919	16.9	1946	19.2	19.2
1920	23.3	1947	21.7	20.5
1921	20.3	1948	17.6	17.9
1922	19.0	1949	16.3	16.7
1923	17.8	1950	15.1	15.8
1924	17.1	1951	15.6	15.5
1925	16.6	1952	15.2	15.3
1926	17.1	1953	16.6	15.5
1927	14.5			
1928	15.6			
1929	14.0			
1930	15.7			



Still births numbered 24 in Swindon during 1953 compared with 23 during 1952. They were made up as follows:—

	1953			1952		
	MALES	FEMALES	TOTAL	MALES	FEMALES	TOTAL
Legitimate -	12	11	23	7	14	21
Illegitimate -	1	—	1	1	1	2
TOTALS -	13	11	24	8	15	23

The stillbirth rates per 1,000 population for the last five years in Swindon and England and Wales are:—

YEAR	STILLBIRTH RATE PER 1000 POPULATION	
	Swindon	England & Wales
1949	0.17	0.39
1950	0.45	0.37
1951	0.30	0.36
1952	0.33	0.35
1953	0.35	0.35



## DEATHS AND DEATH RATES

There were 802 deaths from all causes attributed to the Borough of Swindon during 1953 as compared with 755 during 1952. The death rate per 1,000 population during those years was 11.6 and 10.96 respectively. The death rate of 11.6 compares with the death rate for England and Wales, which was 11.4.

In studying the table on page 11, which analyses the causes of death, it will be seen that there was in 1953 a big increase in the deaths from influenza, bronchitis and pneumonia. Of the nine deaths from influenza, six occurred in January and February. 32 of the 61 deaths from pneumonia and 19 of the 41 deaths from bronchitis occurred in the first quarter of the year. It will be remembered that the weather in the early part of the year was cold and foggy, and there was an epidemic of influenza and colds which reached its maximum in February.

It will again be seen that diseases of the heart and circulatory system are by far the most common causes of death. The deaths from cancer of the lung and bronchus numbered 27, the same as in 1952, and all but three of these cases occurred in males. Deaths from all forms of cancer numbered 145, giving a higher death rate from this cause than in the previous five years.

The deaths from tuberculosis numbered 16 as compared with 15 in 1952.

From the table on page 13, it will be seen that during the year there was a considerable rise in the proportion of deaths in the age group 45-65 and a fall in the group over 65 years of age.

# AN ANALYSIS OF THE CAUSE OF DEATH IN SWINDON during 1953 and 1952.

Cause of Death	1953 1952			
	Males	Females	Total	Total
Tuberculosis respiratory - - -	11	3	14	13
Tuberculosis other - - -	2	—	2	2
Syphilitic disease - - -	2	1	3	—
Diphtheria - - -	—	—	—	—
Whooping Cough - - -	—	—	—	—
Meningococcal infections - - -	—	1	1	—
Acute Poliomyelitis - - -	—	2	2	—
Measles - - -	—	—	—	—
Other infective and parasitic diseases - - -	1	1	2	3
Malignant Neoplasm, Stomach - - -	14	6	20	15
Malignant Neoplasm, Lung, Bronchus - - -	24	3	27	27
Malignant Neoplasm, Breast - - -	1	15	16	11
Malignant Neoplasm, Uterus - - -	—	6	6	9
Other malignant and lymphatic neoplasms - - -	41	35	76	69
Leukaemia, aleukaemia - - -	1	6	7	5
Diabetes - - -	—	2	2	4
Vascular lesions of nervous system - - -	31	58	89	93
Coronary disease, Angina - - -	56	19	75	80
Hypertension with Heart disease - - -	12	11	23	17
Other Heart diseases - - -	76	76	152	158
Other Circulatory diseases - - -	12	17	29	29
Influenza - - -	4	5	9	2
Bronchitis - - -	29	12	41	28
Pneumonia - - -	32	29	61	38
Other diseases of Respiratory system - - -	4	1	5	9
Ulcer of Stomach and Duodenum - - -	11	3	14	7
Gastritis, Enteritis and Diarrhoea - - -	—	1	1	3
Nephritis and Nephrosis - - -	2	3	5	16
Hyperplasia of Prostate - - -	13	—	13	11
Pregnancy, Childbirth, Abortion - - -	—	2	2	2
Congenital malformations - - -	1	6	7	8
Other defined and ill-defined diseases - - -	30	43	73	88
Motor vehicle accidents - - -	9	1	10	6
Other accidents - - -	3	3	6	8
Suicide - - -	3	3	6	4
Homicide and Operations of war - - -	1	2	3	—
	<hr/> 426	<hr/> 376	<hr/> 802	<hr/> 755

The following tables give the death rates per thousand population from various causes, in Swindon and England and Wales during 1953:—

CAUSE OF DEATH	DEATH RATE PER 1000 POPULATION	
	Swindon	England & Wales
All Causes - -	11.60	11.40
Tuberculosis - -	0.23	0.20
Influenza - -	1.34	0.16
Acute Poliomyelitis - -	0.20	0.01
Pneumonia - -	0.88	0.55

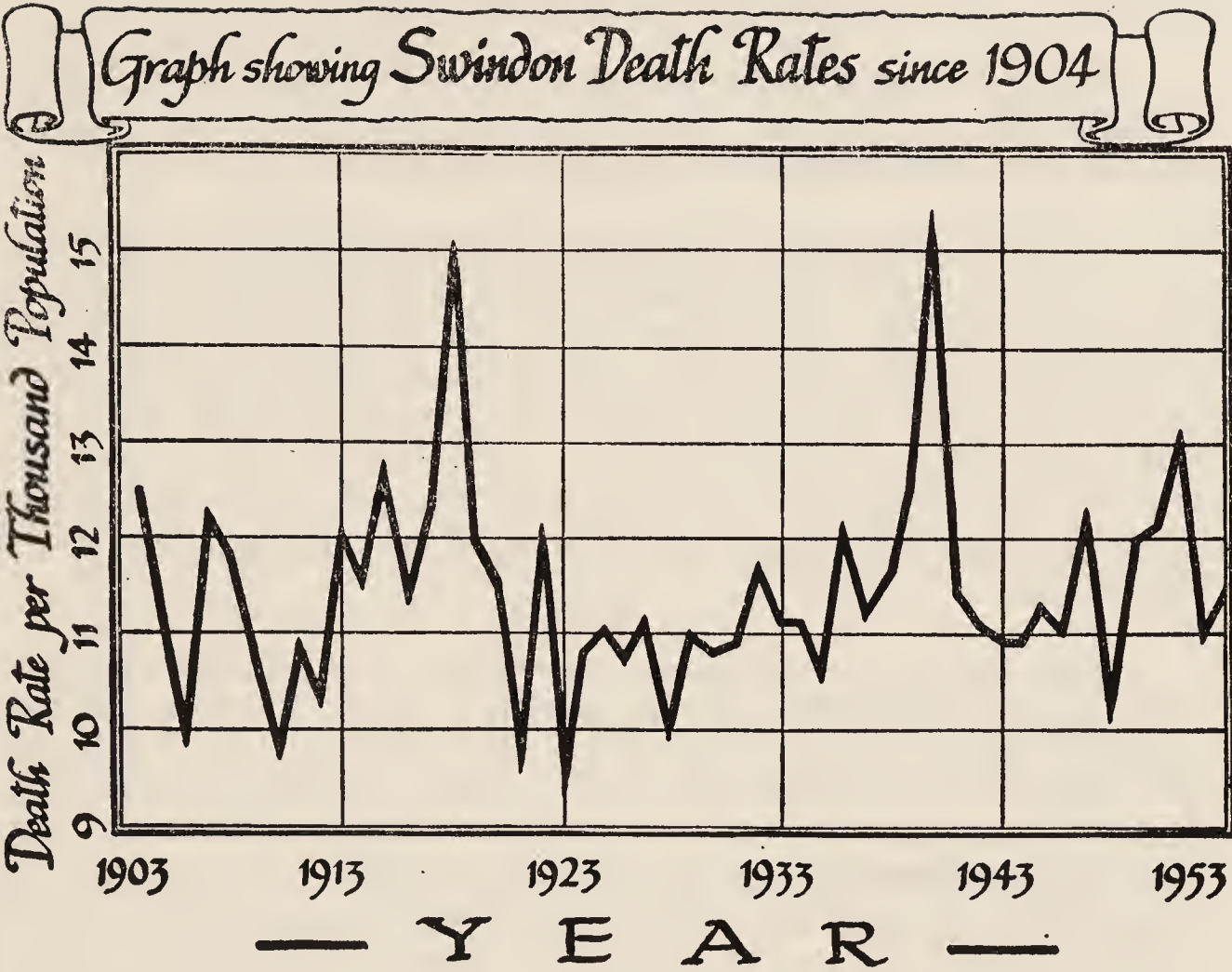
Deaths from Cancer and Malignant Neoplasms numbered 145 during 1953. During 1952 they numbered 131.

There were 368 deaths from circulatory, vascular and heart conditions usually associated with old age. 367 deaths occurred from this group of conditions during 1952.

**TABLE SHOWING SWINDON DEATH RATES FROM 1904 TO 1953 WITH COMPARATIVE DEATH RATES OF ENGLAND AND WALES SINCE 1941**

Year	Death Rate Swindon	Year	Death Rate Swindon	Death Rate England & Wales
1904	12.5	1929	11.0	
1905	11.2	1930	10.8	
1906	9.9	1931	10.9	
1907	12.3	1932	11.7	
1908	11.8	1933	11.1	
1909	10.8	1934	11.1	
1910	9.7	1935	10.5	
1911	10.9	1936	12.2	
1912	10.3	1937	11.2	
1913	12.1	1938	11.6	
1914	11.5	1939	12.5	
1915	12.8	1940	15.4	
1916	11.3	1941	11.4	13.5
1917	12.3	1942	11.1	12.3
1918	15.1	1943	10.9	13.0
1919	12.0	1944	10.9	12.7
1920	11.6	1945	11.3	12.6
1921	9.6	1946	11.0	12.0
1922	12.2	1947	12.3	12.0
1923	9.3	1948	10.1	10.8
1924	10.8	1949	12.0	11.7
1925	11.1	1950	12.2	11.6
1926	10.7	1951	13.2	12.5
1927	11.2	1952	10.9	11.3
1928	9.9	1953	11.6	11.4





The number of deaths and the death rate per 1,000 population from the main causes of death are given in the following table:—

Year	Circulatory and Heart diseases		Respiratory diseases		Tuberculosis		Cancer	
	No.	Rate per 1000	No.	Rate per 1000	No.	Rate per 1000	No.	Rate per 1000
1949	387	5.66	97	1.42	29	0.42	132	1.91
1950	437	6.35	74	1.07	32	0.47	135	1.96
1951	429	6.25	112	1.63	20	0.29	121	1.76
1952	367	5.33	75	1.09	15	0.22	131	1.90
1953	368	5.33	107	1.55	16	0.23	145	2.10

The ages at death of Swindon people are given in the following table:—

Year	0—1	1—5	5—15	15—45	45—65	Over 65	Total
1952	17	3	4	38	159	534	755
1953	21	6	9	46	207	513	802

## MATERNAL MORTALITY

During the year there were two maternal deaths, which gives a death rate of 1.77 per 1,000 births as compared with a figure of 0.76 per 1,000 births for England and Wales.

It will be seen from the table given below that over the past five years the maternal mortality rate in Swindon has, with the exception of 1950, been higher than that for England and Wales as a whole. In 1950 there were no maternal deaths, but for the other years since 1949 there have been two maternal deaths annually. Even one maternal death a year would give us a higher rate than that for the country as a whole. I draw attention to this fact to show that statistics based on such small numbers are apt to be misleading.

Over England and Wales as a whole the maternal mortality rate has fluctuated little over the past five years. It appears, therefore, that without the active co-operation of the patient and all those concerned in the maternity services, little progress can be made towards reducing this cause of death. Full investigation of all such deaths are made, and while, in many instances, unforeseen and unforeseeable factors do arise, one does find in other cases the death could have been prevented if the patient had sought early medical advice or had co-operated with those concerned with her medical care.

The maternal mortality rates per 1,000 total births for Swindon and England and Wales since 1949 are shown in the following table:—

YEAR	MATERNAL DEATHS IN SWINDON	RATE PER 1000 TOTAL BIRTHS SWINDON	RATE PER 1000 TOTAL BIRTHS ENGLAND & WALES
1949	2	1.77	0.98
1950	0	0	0.86
1951	2	1.83	0.79
1952	2	1.87	0.72
1953	2	1.77	0.76

## INFANT MORTALITY

21 infants under the age of one year died in Swindon during 1953, giving an Infant Mortality Rate of 18.3 per 1,000 live births. The corresponding number and rate of Swindon during 1952 were 17 and 16.2.

The causes of deaths in infants under one year of age during 1953 and 1952 were:—

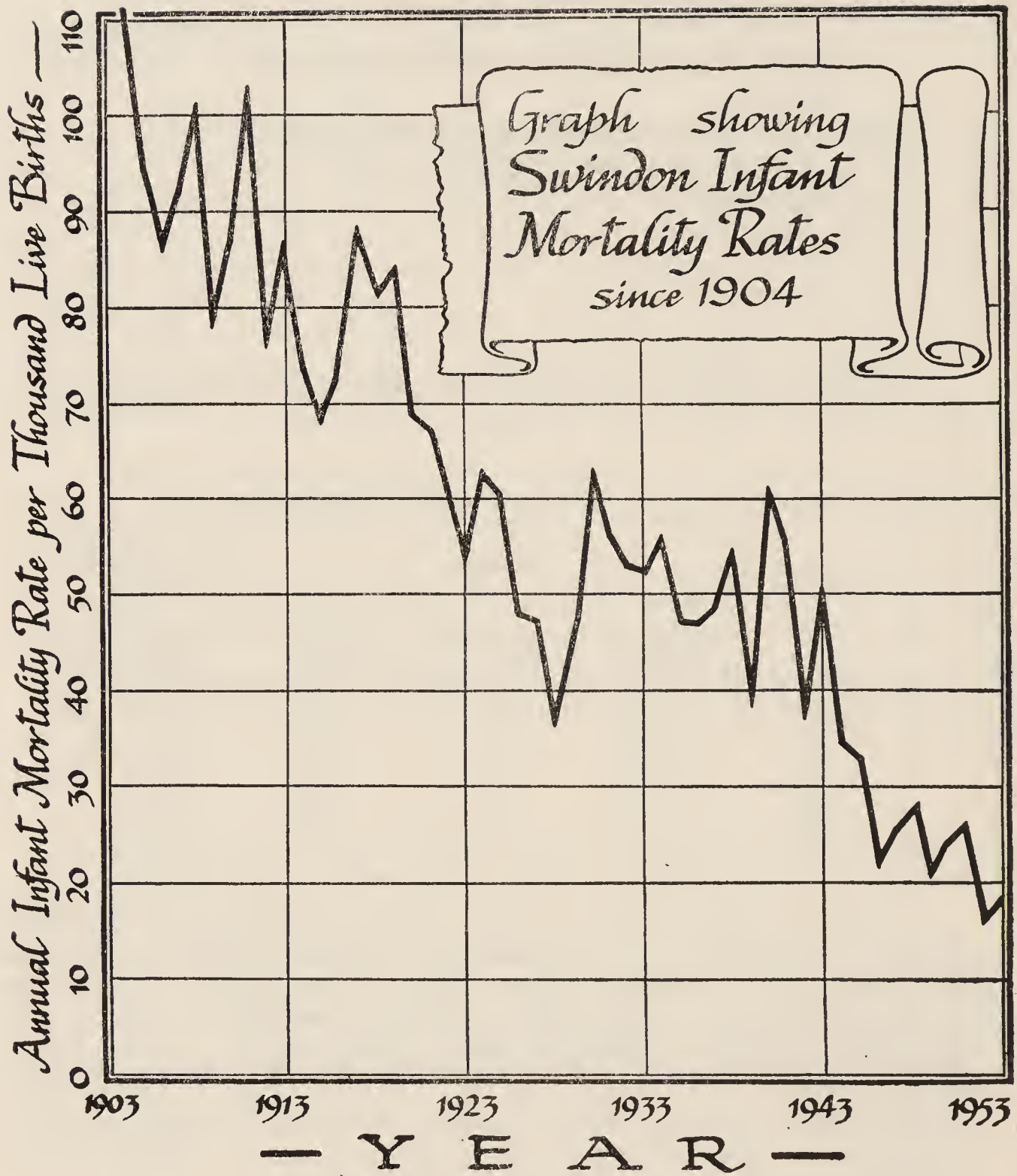
				1953	1952
Bronchitis, Pneumonia and other respiratory diseases	-	-	-	5	3
Diarrhoea, Enteritis and other internal disorders				2	—
Congenital defects, Malformations and Prematurity	-	-	-	10	8
Other causes	-	-	-	4	6
				—	—
				21	17
				—	—

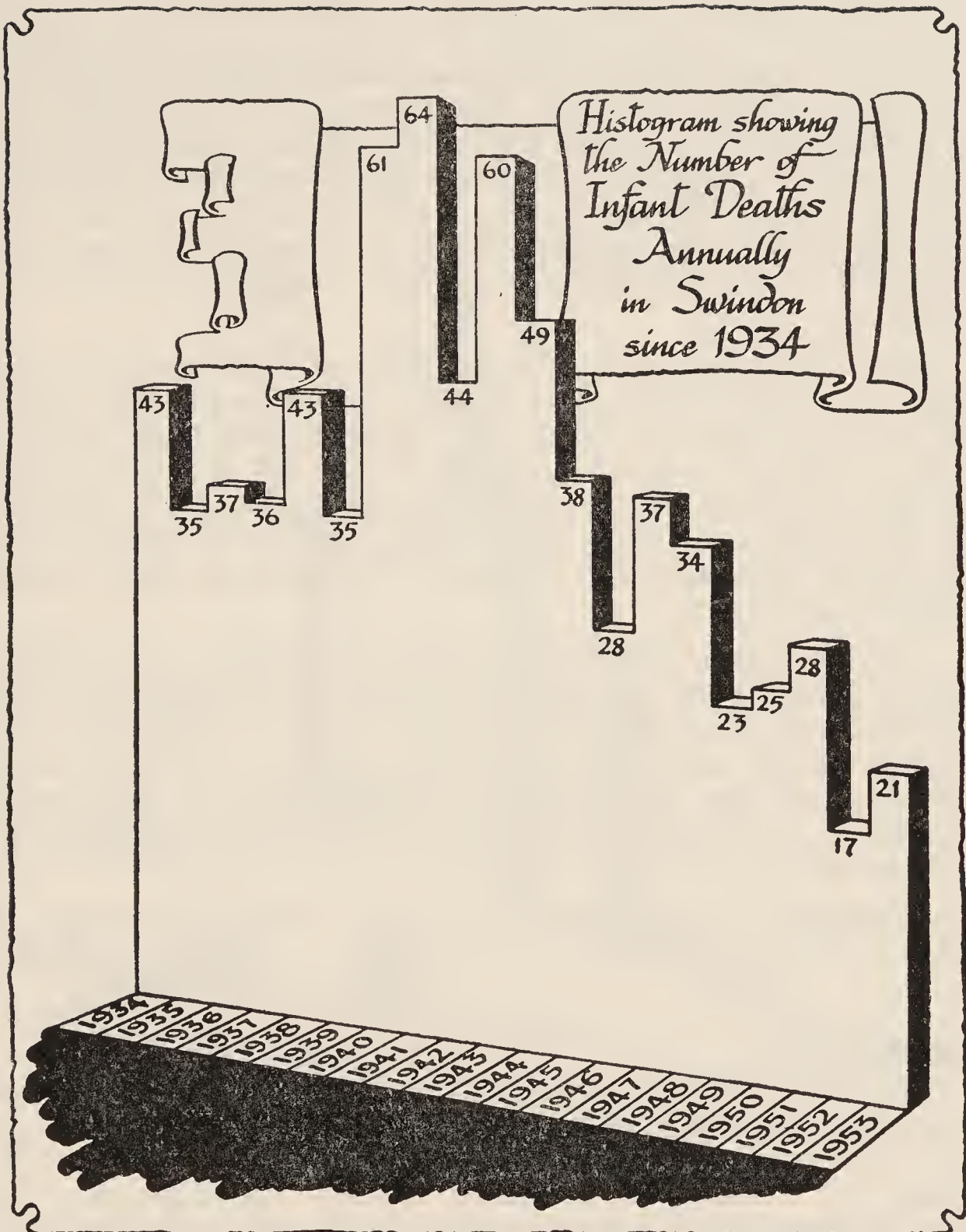
The table below gives figures of Infant Mortality during the last 5 years for Swindon and England and Wales:—

YEAR	RATE PER 1000 LIVE BIRTHS			
	Swindon			ENGLAND & WALES
	NEONATAL RATE	RATE-AGE 4 wks.-1 yr.	MORTALITY RATE	MORTALITY RATE
1949	8.9	11.7	20.6	32.0
1950	17.3	6.7	24.0	29.8
1951	20.5	5.6	26.1	29.6
1952	11.4	4.8	16.2	27.6
1953	11.3	7.0	18.3	26.8

It will be noted from the above table that although the Infant Mortality in Swindon is considerably lower than that for England and Wales, it is somewhat higher than the record low rate for last year. The increase is all in the age group 4 weeks to one year, and the causes of these deaths are listed above. As in past years, the largest number of infant deaths fall into the category of congenital defects, malformations and prematurity. Until much more is known of the factors contributing to this category of defect, there seems to be little that can be done to prevent such deaths.







## INCIDENCE OF INFECTIOUS DISEASES

In December, 1952, following on a period of cold and foggy weather, there was an outbreak of influenza. This outbreak continued into January, 1953, and for the week ending 6th January it was reported by the Ministry of National Insurance that the number of first certificates of illness had reached 173% of the average. In the week ending 20th January one infant school reported that over 50% of the pupils were absent suffering from influenza and bronchitis. The epidemic abated quickly in March. Of the nine deaths attributed to influenza, six occurred in January and February. Again, during the months of January, February and March, there were 32 deaths attributable to pneumonia and 19 to bronchitis.

From the table on page 23 it will be seen that during the year there was a high incidence of measles, 1,490 cases being notified, but no deaths from this cause were recorded. The table illustrates well the biennial cycle of incidence of measles. It would appear, too, that the greater the incidence one year, the less the incidence in the following year. Thus, one would expect in Swindon to find that during 1954 there will be only a comparatively small number of cases notified.

During 1951 and 1952, there was a big increase in the notifications of scarlet fever, but during 1953 there was a marked fall in its incidence, only 62 cases being notified as against 169 last year. The majority of the cases were reported to be of a very mild nature, and only very few of them required hospitalisation. Most of the admissions to hospital were made because of social reasons or to obviate the spread of the disease through food handlers.

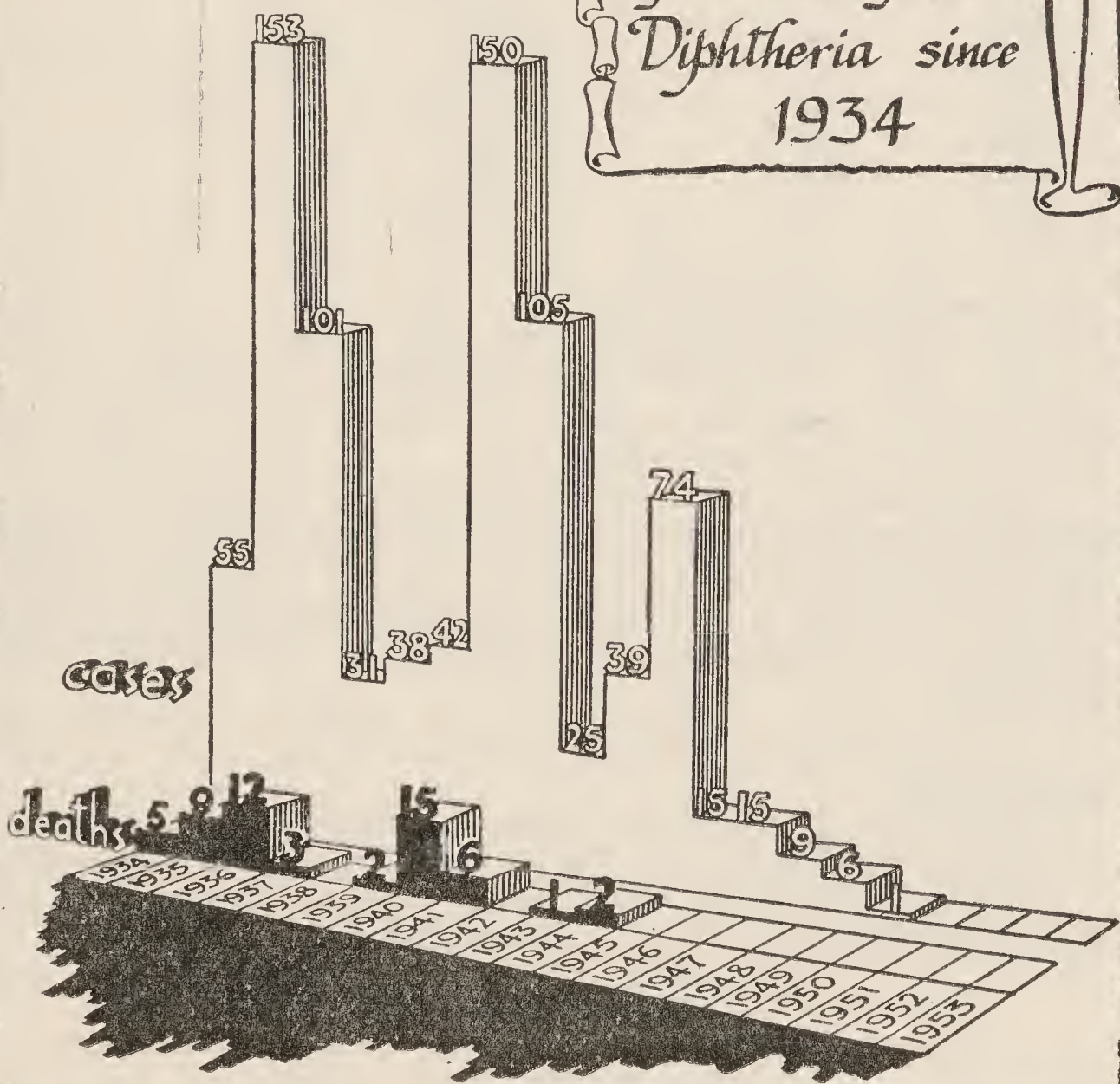
Comments on the incidence of other infectious diseases are made under separate headings as follows:—

### **Diphtheria.**

For the fourth successive year there were no cases of diphtheria notified in Swindon, and there have been no deaths from this cause since 1944. A study of the histogram on page 19 shows very dramatically the conquest of diphtheria through immunisation. Continuous efforts are necessary to keep up the rate of immunisation, as many parents, lulled into a false sense of security by the absence of the disease, are unwilling to submit their children to this simple process. It is only by constant propaganda and persuasion that these parents can be convinced of the need for immunisation. On the other hand, the great majority of parents accept immunisation against diphtheria as essential for their children, but many fewer look upon vaccination in the same light, although the merits of the latter procedure can be equally well demonstrated over a much greater number of years.



*Histogram showing Number of Cases of  
Diphtheria Notified Annually, and Number  
of Deaths from  
Diphtheria since  
1934*



**TABLE GIVING THE INCIDENCE OF DIPHTHERIA IN SWINDON AND THE NUMBER OF DEATHS DURING THE LAST TWENTY YEARS**

YEAR	NO. OF CASES OF DIPHTHERIA	NO. OF DEATHS FROM DIPHTHERIA	YEAR	NO. OF CASES OF DIPHTHERIA	NO. OF DEATHS FROM DIPHTHERIA
1934	55	5	1944	74	2
1935	153	9	1945	15	0
1936	101	12	1946	15	0
1937	31	3	1947	9	0
1938	38	0	1948	6	0
1939	42	2	1949	1	0
1940	150	15	1950	0	0
1941	105	6	1951	0	0
1942	25	0	1952	0	0
1943	39	1	1953	0	0

### **Food Poisoning and Dysentery.**

Five cases of dysentery were notified during the year. Four of these were not confirmed bacteriologically. The fifth case, a child aged 19 weeks, was found to be infected with an organism of the *Salmonella* (food-poisoning) group.

In all cases, the household was visited by a medical officer of the department and enquiries made as to possible sources of infection. The family was also advised as to measures for the prevention of spread of infection, and faecal specimens obtained from all other members of the household. No further cases were, however, found in this way.

All the cases were comparatively mild and there were no deaths.

### **Tuberculosis.**

During 1953, 101 primary cases of pulmonary tuberculosis and 11 cases of non-pulmonary tuberculosis were notified in Swindon.

The following table shows the age and sex incidence of pulmonary and non-pulmonary tuberculosis notified during 1953:—

AGE PERIOD	PULMONARY		NON-PULMONARY		TOTAL
	MALE	FEMALE	MALE	FEMALE	
Under 5	1	2	1	—	4
5—10	1	—	1	1	3
10—15	1	—	1	—	2
15—20	7	7	—	—	14
20—25	3	13	3	—	19
25—30	12	4	1	—	17
30—40	11	2	—	—	13
40—50	12	3	—	1	16
50—60	10	3	1	—	14
Over 60	5	4	1	—	10
TOTALS	63	38	9	2	112



Apart from the above notifications, 22 cases of tuberculosis in Swindon became known to the Health Department through death returns, posthumous notifications, transfers from other areas, etc. Of the deaths which occurred during 1953, 43.75% occurred in non-notified cases.

The comparative figures of the incidence and death rates from tuberculosis since 1949 are given below:—

YEAR	PULMONARY TUBERCULOSIS				ALL FORMS OF TUBERCULOSIS			
	Primary cases notified	Case rate per 1000 popn.	Deaths	Death rate per 1000 popn.	Cases notified	Case rate per 1000 popn.	Deaths	Death rate per 1000 popn.
1949	101	1.47	27	.39	120	1.75	29	.42
1950	84	1.22	31	.45	106	1.54	32	.46
1951	64	0.93	18	.26	86	1.25	20	.29
1952	49	0.71	13	.19	62	.90	15	.22
1953	101	1.46	14	.20	112	1.62	16	.23

### Mass Radiography.

A mass radiography unit was stationed in the town from 4th May to 29th September. Before and during its visit the widest possible publicity was given to the unit, and its purpose explained in public meetings and in propaganda leaflets. All the major works and industries in the town were contacted, and the unit was either stationed in the works or near it so that all the workers could have easy access to it without undue loss of time. Special times were allotted to large groups of workers, and the unit also was stationed in various parts of the town so that all the public could have an opportunity of attending for examination. Facilities for stationing the unit in various works were readily granted wherever requested, and similarly, the various departments of the Borough Council and the Local Education Authority were most co-operative in giving all the help they could towards the success of this campaign.

The increase in the notifications of tuberculosis during the year was largely due to the number of cases discovered by mass radiography. A summary of the work done by the unit received from its director, Dr. R. T. James, is given below. One had hoped that a much larger proportion of the total population would have been x-rayed, but the usefulness of such a survey may be gathered from the number of chest cases referred for further investigation and the number of tubercular cases discovered. Each previously unknown case might have given rise to several new cases before the patient became aware he or she was suffering from this disease. It is these unknown cases—the infective pool—which constitute the greatest menace to the population, as once a case is recognised, treatment



and steps to prevent the spread of infection are put in hand. Again, too, with the new methods of treatment now available, the early cases discovered have a much better chance of cure in a short time, thereby saving the cost of the long and expensive treatment required when the disease is more advanced. Among certain people there is still a reluctance to submit to mass radiography, and this is often among those who are themselves suspicious of their state of health. Once this fear is overcome, there is no reason why the disease tuberculosis could not be eradicated. A most disturbing factor which supports this argument is the very high percentage of deaths from tuberculosis in persons not notified as such. It is to be hoped, therefore, that the visits of the mass radiography unit to Swindon will be much more frequent in future, and the general public will come to recognise the vast benefits which accrue to everyone from this service. The hospital x-ray service is now being made available to the general practitioners for chest examinations.

With all these facilities available, plus the introduction of B.C.G. vaccination and a more thorough investigation of all possible contacts of every case notified, one should soon see an appreciable lowering of the death rate from tuberculosis, although the notification rate will probably increase for some years.

### MASS RADIOGRAPHY, SWINDON — 1953

	MALE	FEMALE	TOTAL
A No. examined ... ..	12,187	9,610	21,797
B No. recalled for clinical interview (at Unit or elsewhere) ... ..	271	134	405
C % B of A ... ..	2.2	1.6	1.8
D No. referred for further investigation	161	81	242
E % D of A ... ..	1.3	0.8	1.1
F % D of B ... ..	59.5	60.5	59.8
G No. ACTIVE CASES OF P.P. TUBERCULOSIS (reported to date)	24	17	41
H No. of D on whom reports have not yet been received ... ..	23	8	31

### Whooping Cough and Measles

During the year, the incidence of measles was higher than for many years past. This follows the biennial wave of infection seen in the table given below. During 1954, we can anticipate a low incidence of this infection, probably, too, even lower than that of 1952. There were no deaths from measles recorded in spite of the large number notified.

Whooping Cough notifications, on the other hand, were fewer than in any year since 1949. This may be due to the increasing number of children inoculated against whooping cough. There has

as yet been no official guidance on immunisation against whooping cough as compared with diphtheria. Extensive investigations into the efficiency of immunisation against whooping cough have been taking place over a number of years, and the results so far published give hope that it is proving of real value. During the year there were no deaths from this disease.

The following table gives the incidence of whooping cough and measles during the past five years.

YEAR	MEASLES		WHOOPING COUGH	
	Number notified	Number of deaths	Number notified	Number of deaths
1949	964	—	191	3
1950	353	—	233	—
1951	1173	1	287	1
1952	242	—	244	—
1953	1490	—	201	—

### Scarlet Fever

The following table shows the incidence of scarlet fever over the past five years.

Year	No. of Cases notified	No. of Deaths
1949	40	—
1950	32	—
1951	146	—
1952	169	—
1953	62	—

## INFECTIOUS DISEASES

The incidence of notified infectious diseases in Swindon during recent years is given in the following table:—

DISEASE	1949	1950	1951	1952	1953
Acute Pneumonia -	39	32	38	26	72
Acute Poliomyelitis -	5	13	5	2	11
Acute Polioencephalitis	—	—	—	—	—
Cerebrospinal Fever -	—	—	1	1	—
Diphtheria - -	1	—	—	—	—
Erysipelas - -	5	3	1	3	7
Dysentery, Food Poisoning - -	1	7	67	5	1
Measles - -	964	353	1,173	242	1,490
Ophthalmia Neonatorum	—	—	2	2	—
Typhoid and Paratyphoid Fevers	—	1	—	—	1
Puerperal Pyrexia -	24	11	37	51	65
Scarlet Fever - -	40	32	146	169	62
Smallpox - -	—	—	—	—	—
Tuberculosis—pulmonary	101	84	64	49	101
Tuberculosis—non-pulmonary -	19	22	22	13	13
Whooping Cough -	191	233	287	244	201

### Acute Poliomyelitis and Polio Encephalitis

During 1953, twelve cases of poliomyelitis were notified in Swindon as compared with four in 1952. One case was not confirmed, and of the eleven confirmed cases, eight were paralytic and three non-paralytic. There was one death, that of a girl with bulbar paralysis. In this case, a doubtful train of infection was traced, but in no other case was there any evidence of direct or indirect contact with another case of poliomyelitis.

One further case came to light when a woman who died suddenly was found at post-mortem to have been suffering from poliomyelitis.

None of the cases gave any history of recent inoculation or tonsillectomy. The cases were all notified during the period July to October.

Four of the confirmed cases were adults, three children of 5 to 14, and four children under 5 years of age. This is in accordance with the usual experience that the disease is now tending to attack adults as well as children.

Of the seven surviving paralytic cases, five were still under treatment by the Physiotherapy Department at the end of 1953, one was under observation, and one had been discharged cured.



A comparative table showing the incidence of poliomyelitis since 1944 is set out below.

YEAR	NUMBER OF CASES NOTIFIED	NUMBER OF DEATHS
1944	0	0
1945	2	1
1946	1	0
1947	8	1
1948	5	1
1949	5	0
1950	13	2
1951	5	0
1952	2	0
1953	11	2

### Medical Examination of Corporation Staff

During the year, the Medical Officers of this Department carried out the following examinations of Corporation staff:—

Candidates for entry into the Superannuation Scheme and transfer to the established list of employees	106
Candidates for Public Service Vehicle Licences	- 54
Entrants to Training Colleges	- - 26
Others	- - 25
	<hr/>
TOTAL	211
	<hr/>



## **REPORT OF THE SENIOR SANITARY INSPECTOR FOR THE YEAR 1953**

**To the Chairman and Members of the  
Public Health Committee**

Ladies and Gentlemen,

I have the honour of submitting the Annual Report of work carried out under the supervision of the Senior Sanitary Inspector during the year 1953.

### **STAFF**

Mr. A. E. Warminger left the service of the Corporation owing to ill health in November and his services were not available at any time during the year. This vacancy had not been filled at the time this report was prepared.

### **FOOD AND DRUGS ACT 1938**

122 samples of milk and 91 samples of other foodstuffs were submitted to the Public Analyst for examination. Particulars of these samples will be found on page 38 of this report.

168 samples of milk were submitted to the Pathological Laboratory for bacteriological examination, details of which are found on page 37.

109 samples of milk were submitted to the Pathological Laboratory for biological examination and 2 samples were found to contain tubercle bacilli. This milk could have come from any of five farms all situated outside the Borough. Arrangements were immediately made for the milk from these farms to be pasteurised, and the Ministry of Agriculture and Fisheries Veterinary Surgeon was at once informed so that inspection of the cattle could be made.

One firm of bakers, whose premises are situated outside the Borough, was fined £5 and 10/- costs for selling a sliced loaf of bread which contained pieces of newspaper.

Under the provisions of the Public Health Act 1936, it is an offence to sell any food in any shop or premises where old clothes or similar articles are sold. There was one prosecution under this section and the shopkeeper was fined £5 and £3-3-0 costs. These premises are no longer used for the sale of food.

### **ICE CREAM**

12 samples of ice cream submitted to the Public Analyst were found to comply with the Food Standards (Ice Cream) Order 1953, which came into force on 1st June, 1953 and prescribed that ice cream should contain not less than 5% fat, 10% sugar and 7½% milk solids other than fat.



17 samples of ice cream were submitted for bacteriological examination and were graded as follows:—12 in Grade 1, 4 in Grade 2 and 1 in Grade 4. These examinations show a continual improvement in the bacteriological quality of ice cream sold within the Borough.

## FOOD AND DRUGS INSPECTIONS

1762 inspections were made to premises where food is sold or prepared for sale. Practically all these premises had washing facilities with hot and cold water laid on for the use of persons engaged in the handling of food. A high standard of personal cleanliness is demanded from all persons engaged in the handling of food, and this cannot be achieved unless proper washing facilities are available, but it is essential that these facilities are properly used. Personal hygiene depends very much on early education and training, and talks are given from time to time to employees of various firms and to certain women's organisations on the importance of personal cleanliness and how food poisoning may occur if the very elementary principles of personal hygiene are not carried out.

## MEAT INSPECTION

The new slaughterhouse, erected by the Ministry of Food, was opened in January. This slaughterhouse was planned to serve a medium-sized town and the immediate surrounding rural districts with a population of about 100,000. Over 30,000 animals were slaughtered up to the end of 1953 and approximately two-thirds of the carcasses were sent outside the Swindon area. The 'line dressing' system of slaughtering is in operation and the estimated maximum daily slaughtering capacity of 120 cattle has been exceeded on several occasions. Each animal is inspected at the time of slaughter and meat inspectors are in attendance the whole time the slaughterhouse is in use including Sundays. It had been hoped that Sunday work would not be necessary when the new slaughterhouse was in operation, but it has not been possible to eliminate slaughtering on Sundays.

91 tons of meat were found on inspection to be unfit for human consumption, and the graph on page 40 shows the number of animals found on inspection to be affected with Tuberculosis.

## DRAINAGE WORK

The drains of 246 premises were relaid or overhauled during the year, under the supervision of Sanitary Inspectors.

## HOUSING REPAIRS

Housing repairs were carried out at 541 houses during the year as a result of informal action. Statutory Notices were served in respect of 9 dwellings and in one instance the owner failed to

comply with the Statutory Notice. A Nuisance Abatement Order was made by the Magistrates' Court. This Order was not complied with and the Corporation did the necessary work in default of the owner, the costs of the work being recoverable from the owner.

## OVERCROWDING

The records of the department show that at the beginning of the year there were 21 instances of overcrowding outstanding from 1952; these affected  $161\frac{1}{2}$  persons. 9 new cases affecting  $73\frac{1}{2}$  persons were recorded and 15 cases affecting  $131\frac{1}{2}$  persons were abated, during the year. This left 15 instances of overcrowding affecting  $103\frac{1}{2}$  persons outstanding at the end of 1953. The overcrowding standard of the Housing Act is very low. For example,  $7\frac{1}{2}$  persons are permitted to occupy a four-roomed house which contains only 2 bedrooms, without it being overcrowded. Any children under 10 years of age count as half-units.

## NATIONAL ASSISTANCE ACT 1948

Under this Act it is the responsibility of the Local Authority to carry out the burial or cremation of any person who has died in their area, where no suitable arrangement has been made for the disposal of the body. During the year under review, arrangement was made for the burial of one person.

## PREVENTION OF DAMAGE BY PESTS ACT 1949

Systematic baiting of the sewer manholes was carried out twice during the year. Investigation showed that there was still some evidence of rat infestation in the sewers in the older parts of the Borough, but there is little evidence in the sewers of the more recently constructed areas. There is practically no evidence of any rats at the Rodbourne Tip. In order to comply with the requirements of the Ministry of Agriculture and Fisheries, disinfestation of business premises is now charged for. Disinfestation was carried out at 45 business premises and £69-13-9 was recovered from the occupiers. Occupiers of business premises are not obliged to accept the Corporation service; they can carry out the necessary treatment themselves or they can employ one of the several servicing companies which specialise in rats and mice destruction.

## RAG FLOCK AND OTHER FILLING MATERIALS ACT 1951

This Act requires the registration of premises where upholstery, including the stuffing or lining of bedding toys., etc., is being done, and requires that any rag flock or other filling material used on such premises shall comply with the standard of cleanliness prescribed in the Rag Flock and Other Filling Materials Regulations

1951. The Act does not apply to premises where only the remaking or reconditioning of articles is carried on, and the fitting out of railway carriages is also exempt from the provisions of the Act. At the end of the year five premises were registered and five licences in force for the storage of rag flock.

In concluding my report, I wish to thank all the Officers of the Corporation for their assistance and ready co-operation throughout the year.

H. A. BANWELL,

Senior Sanitary Inspector.



## INSPECTIONS AND REVISITS — 1953

Premises	Primary Inspections		Revisits	
PUBLIC HEALTH ACT 1936				
Dwelling-houses on complaint	-	-	622	493
Dwelling-houses no nuisances found	-	-	425	15
Other premises	-	-	185	82
Caravans	-	-	77	18
Marine Stores	-	-	1	—
Smoke observations	-	-	36	9
Stables and Piggeries	-	-	24	6
Theatres, Cinemas etc.	-	-	24	7
Public Sanitary Conveniences	-	-	26	1
Common Lodging Houses	-	-	6	—
Verminous premises	-	-	30	11
Drainage Work under supervision	-	-	885	85
Infectious Disease enquiries	-	-	132	1
HOUSING ACTS 1936 and 1949				
Dwelling-houses on complaint	-	-	238	830
Dwelling-houses no defects found	-	-	3	2
Overcrowding	-	-	20	33
FOOD AND DRUGS ACT 1938				
Bakehouses	-	-	72	18
Dairies	-	-	67	28
Milk samples—bacteriological	-	-	168	—
Milk samples—chemical	-	-	122	—
Milk samples—biological	-	-	109	—
Ice-cream samples—bacteriological	-	-	24	—
Ice-cream samples—chemical	-	-	12	—
Food and Drugs samples	-	-	79	—
Food samples—bacteriological	-	-	10	—
Water samples—bacteriological	-	-	41	—
Water samples—chemical	-	-	11	—
Water samples—from swimming baths	-	-	18	—
Water samples—sewage effluent	-	-	12	—
Ice-cream premises	-	-	66	43
Restaurants, cafes etc.	-	-	137	40
Fish shops and fish friers	-	-	88	4
Markets and food stalls	-	-	295	3
Food preparation and storage premises	-	-	171	40
Butchers' shops	-	-	195	21
Slaughterhouses	-	-	743	—
Food shops	-	-	763	78
Licensed premises	-	-	9	—

FACTORIES ACT 1937

Factories—mechanical	-	-	-	326	78
Factories—non-mechanical	-	-	-	115	24
Outworkers	-	-	-	202	—
SHOPS ACT 1950, section 38	-	-	-	372	3
RAG FLOCK AND OTHER FILLING					
MATERIALS ACT 1951	-	-	-	14	2
NATIONAL ASSISTANCE ACT 1948	-	-	-	25	—
PREVENTION OF DAMAGE BY PESTS					
ACT 1949	-	-	-	406	57
MERCHANDISE MARKS ACT 1926	-	-	-	27	—

SWINDON CORPORATION ACTS 1947 and 1951:—

Hairdressers and Barbers	-	-	-	53	15
Hawkers of Food	-	-	-	9	—
MISCELLANEOUS	-	-	-	1752	15

				9559	2150
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**PUBLIC HEALTH ACT 1936 AND HOUSING ACTS  
1936 AND 1949**



**NUISANCES ABATED AND  
HOUSING DEFECTS REMEDIED**

Defective ceilings	-	-	-	-	-	86
„ walls	-	-	-	-	-	378
Damp walls	-	-	-	-	-	166
Dirty or verminous rooms	-	-	-	-	-	327
Defective floors	-	-	-	-	-	57
„ firegrates	-	-	-	-	-	28
„ windows	-	-	-	-	-	110
„ doors	-	-	-	-	-	37
„ stairs	-	-	-	-	-	7
„ coppers	-	-	-	-	-	3
„ sinks	-	-	-	-	-	9
New sinks provided	-	-	-	-	-	48
Water services provided or repaired	-	-	-	-	-	3
Defective chimneys	-	-	-	-	-	38
„ roofs	-	-	-	-	-	119
„ eavesgutters and/or rain-water-pipes	-	-	-	-	-	112
„ yard paving	-	-	-	-	-	5
„ forecourt paving	-	-	-	-	-	2
„ water-closets repaired	-	-	-	-	-	17
New pedestal pans fixed	-	-	-	-	-	106
Defective flushing-cisterns repaired	-	-	-	-	-	35
New flushing-cisterns fixed	-	-	-	-	-	23
Additional water-closets provided	-	-	-	-	-	68
Choked drains	-	-	-	-	-	89
Defective drains	-	-	-	-	-	246
„ traps	-	-	-	-	-	8
Drains tested	-	-	-	-	-	217
New baths fixed	-	-	-	-	-	40
Offensive accumulations removed	-	-	-	-	-	20
„ animals	-	-	-	-	-	—
Overcrowding abated	-	-	-	-	-	15
Dustbins provided	-	-	-	-	-	5
Food-stores provided or ventilated	-	-	-	-	-	—
Rent Books made to comply with the Housing Act	-	-	-	-	-	1
Miscellaneous	-	-	-	-	-	247
<b>TOTAL</b>						<b>2672</b>



**Matters requiring attention and remedied following inspection,  
in 1953**

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Shops Act 1950	-	-	-	-	2
Food and Drugs (Milk, Dairies and Artificial Cream) Act 1950	-	-	-	-	6
Food and Drugs Act 1938	-	-	-	-	98

**HOUSING STATISTICS**

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**PUBLIC HEALTH ACT 1936 and  
HOUSING ACTS 1936 and 1949.**

Houses inspected	-	-	-	-	1288
„ found to be defective	-	-	-	-	432
„ rendered fit by informal action	-	-	-	-	541
„ „ „ „ formal „	-	-	-	-	1
Informal notices served	-	-	-	-	235
„ „ complied with	-	-	-	-	225
Statutory Notices, Public Health Act—					
Served	-	-	-	-	9
Complied with by owners	-	-	-	-	—
Complied with by Corporation in default of owners	-	-	-	-	1
Statutory Notices, Housing Acts—					
Served	-	-	-	-	—
Complied with by owners	-	-	-	-	—
„ „ „ Corporation in default of of owners	-	-	-	-	—

**HOUSING ACT 1936, section 58**

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**Overcrowding**

Houses overcrowded at end of 1952	-	-	21
Number of persons affected	-	-	161½
New cases of overcrowding found in 1953	-	-	9
Number of persons affected	-	-	73½
Cases of overcrowding abated during 1953	-	-	15
Number of persons affected	-	-	131½
Cases of overcrowding not abated at end of 1953	-	-	15
Number of persons affected	-	-	103½

## DISINFESTATION OF VERMINOUS PROPERTY

---

Type of Property					No. of Rooms Disinfested
Council owned	-	-	-	-	55
Other property	-	-	-	-	263
Lots of bedding disinfested	-	-	-	-	5
Lots of bedding destroyed	-	-	-	-	1

After disinfestation has been carried out, periodical visits are made until complete disinfestation of the premises has been effected.

## DISINFECTION AFTER INFECTIOUS DISEASE

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Work carried out					Number Disinfected
Rooms disinfected	-	-	-	-	174
Articles disinfected	-	-	-	-	9538
Library books disinfected	-	-	-	-	201
Bedding from hospitals disinfected	-	-	-	-	75
„ „ private premises disinfected	-	-	-	-	35
„ destroyed	-	-	-	-	15

## FREE DISINFECTANTS ISSUED

Fluid — 141 pints

## REGISTERED COMMON LODGING HOUSE

Number of Common Lodging Houses	-	1
Number of Persons for whom accommodation is provided—adults	-	87
children	-	4

## RAG FLOCK AND OTHER FILLING MATERIALS ACT 1951

Premises licensed to store Rag Flock	-	5
Premises registered	-	5

## SWINDON CORPORATION ACTS 1947 and 1951

Premises registered as accommodation for food intended for sale from vehicles	-	15
Hawkers registered for the sale of food from vehicles	-	38
Hairdressers and Barbers	-	90

## FACTORIES ACT 1937

1. The following table gives details of the inspections carried out during the year.

Premises	No. on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
(i) Factories in which sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	102	139	5	—
(ii) Factories not included in (i) to which section 7 applies (a) subject to the Local Authorities (Transfer of Enforcement) Order 1938 - -	199	404	33	—
(b) Others - -	—	—	—	—
(iii) Other premises under the Act, (excluding outworkers premises) - -	—	—	—	—
<b>TOTAL - -</b>	<b>301</b>	<b>543</b>	<b>38</b>	<b>—</b>

## OUTWORK (sections 110 and 111)

Number of Outworkers at August 1953:—

Making, cleaning etc., of wearing apparel -	79
Making of receptacles of paper, cardboard etc.	2
Furniture and upholstery - - -	4



# **FACTORIES ACT 1937 — continued**

## 2. Cases in which defects were found

Particulars	No. of cases in which defects were				No. of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (s.1) - -	—	—	—	1	—
Overcrowding (s.2) -	—	—	1	—	—
Unreasonable temperature (s.3) -	—	—	—	—	—
Inadequate ventilation (s.4) - -	—	—	—	—	—
Ineffective drainage of floors (s.5) -	—	—	—	—	—
Sanitary Conveniences (s.7) - -					
(a) insufficient -	2	10	—	—	—
(b) unsuitable or defective -	54	62	—	2	—
(c) not separate for sexes - -	1	1	—	—	—
Other offences (not including offences relating to Homework) -	2	2	—	1	—
TOTALS - -	59	75	1	4	—

## MILK AND DAIRIES REGULATIONS 1949

On the Registers of the Department are:—

Dairies	-	-	-	-	18
Distributors of Milk	-	-	-	-	21

## MILK (SPECIAL DESIGNATION) (RAW MILK) AND (PASTEURISED AND STERILISED MILK) REGULATIONS, 1949

Licences in force within the Borough, issued by the Town Council of Swindon:—

Dealers' licences authorising the use of the special designation "Tuberculin Tested"	-	-	11
Supplementary licences authorising the use of the special designation "Tuberculin Tested"	-	-	3
Dealers' licences authorising the use of the special designation "Accredited"	-	-	2
Dealers' licences authorising the use of the special designation "Pasteurised"	-	-	7
Dealers' (Pasteurisers') licences authorising the use of the special designation "Pasteurised"	-	-	4
Supplementary licences authorising the use of the special designation "Pasteurised"	-	-	2

Samples of milk submitted for bacteriological examination to the Public Analyst or to the Pathological Laboratory, Gorse Hill.

Designation	No. of Samples taken	No. Satisfactory	No. Not satisfactory
Tuberculin Tested -	29	29	—
Tuberculin Tested (Pasteurised) - -	73	71	2
Pasteurised - -	44	42	2
Accredited - -	4	2	2
Non-designated -	18	16	2
<b>TOTALS - -</b>	<b>168</b>	<b>160</b>	<b>8</b>

## FOOD AND DRUGS ACT 1938

Premises registered for the Preparation or Manufacture of Sausages, or Potted, Pressed, Pickled or Preserved Food	-	-	62
Premises registered for the Manufacture, Sale or Storage of Ice-cream	-	-	239
Butchers' Shops	-	-	70
Wholesale meat stores	-	-	3
Fish shops and fish friers	-	-	57
Bakehouses	-	-	21
Other Food Shops	-	-	523

### Samples submitted to the Public Analyst for Chemical Examination.

Samples taken	Formal	Informal	Genuine	Not genuine
Milk - -	108	14	119	3
Ice-cream - -	—	12	12	—
Plain flour - -	—	3	3	—
Self-raising flour - -	—	5	5	—
Rice - -	—	1	1	—
Ground rice - -	—	4	4	—
Beef sausages - -	4	8	9	3
Pork sausages - -	2	6	7	1
„ chippolatas - -	1	—	—	1
Ice lollies - -	6	14	19	1
Butter - -	6	—	6	—
Mincemeat - -	4	—	4	—
Jam - -	2	—	2	—
Whisky - -	4	—	4	—
Gin - -	3	—	3	—
Rum - -	2	—	2	—
Beer - -	4	—	4	—
<b>TOTALS - -</b>	<b>146</b>	<b>67</b>	<b>204</b>	<b>9</b>

### ICE-CREAM (HEAT TREATMENT ETC.) REGULATIONS 1947

#### Samples of Ice-cream submitted for bacteriological examination

Samples taken	Placed in Grade 1	Placed in Grade 2	Placed in Grade 3	Placed in Grade 4
17	12	4	—	1

As there is no statutory test for the bacteriological examination of ice-cream, the above samples are graded in accordance with the Advisory Bulletin of the Ministry of Health Laboratory Service, 1947.



## PUBLIC HEALTH (MEAT) REGULATIONS 1924

**The following table shows the number of carcasses inspected during 1953**

	Cattle		Calves	Pigs	Sheep and Lambs
	Cows	Others			
<b>TOTALS</b> -       -	2249	7843	2837	7689	12549
<b>Disease other than Tuberculosis</b>					
Whole carcasses condemned       -	35	20	21	34	37
Carcasses of which some part or organ was condemned       -	785	2591	12	881	1579
Approximate percentage of number inspected affected with disease other than Tuberculosis       -	36	33	11.6	11.9	12.8
<b>Tuberculosis only</b>					
Whole carcasses condemned       -       -	23	25	5	13	—
Carcasses of which some part or organ was condemned       -	317	535	2	358	—
Approximate percentage of number inspected affected with Tuberculosis       -	15.11	7.14	.24	4.8	—

### Unsound Food condemned by Sanitary Inspectors during 1953

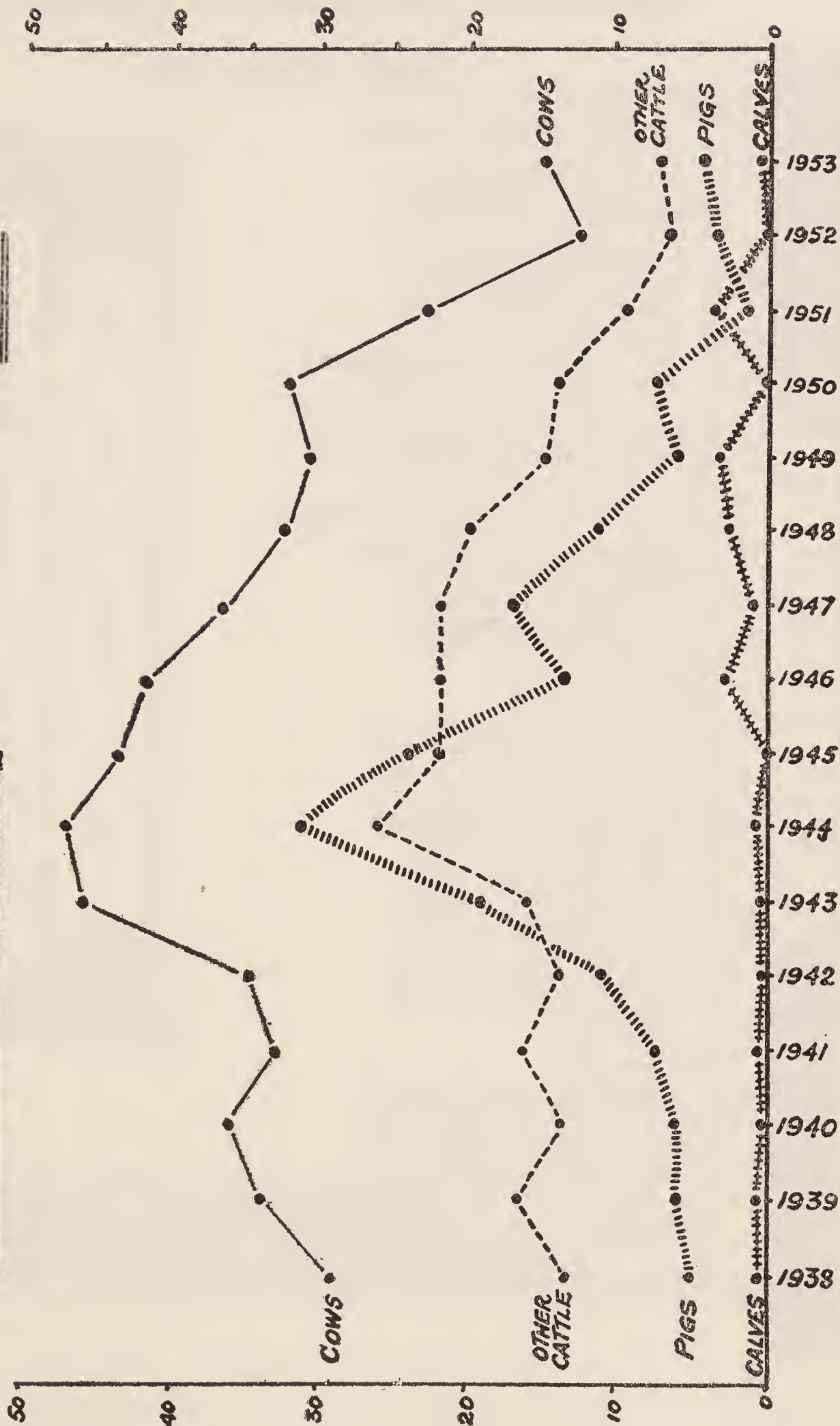
		Tons	cwts.	qrs.	lbs.
Unsound Meat and Offal	-	85	8	1	11
Other Unsound Food	-       -	6	0	2	16
<b>TOTAL</b>		91	8	3	27

## CARCASSES INSPECTED - 1953

COWS - - 22 49  
 OTHER CATTLE - 78 43  
 CALVES - - 28 37  
 PIGS - - 76 89

TOTAL 20618

PERCENTAGE OF  
 CATTLE & PIG CARCASSES  
 FOUND TO BE INFECTED WITH  
 TUBERCULOSIS  
 FROM 1938 TO 1953



# PREVENTION OF DAMAGE BY PESTS ACT 1949

## Premises baited in 1953

Type of Premises					Number baited
Local Authority	-	-	-	-	25
Business	-	-	-	-	83
Dwelling-house	-	-	-	-	453
Agricultural	-	-	-	-	4
Sewer Manholes	-	-	-	-	1764

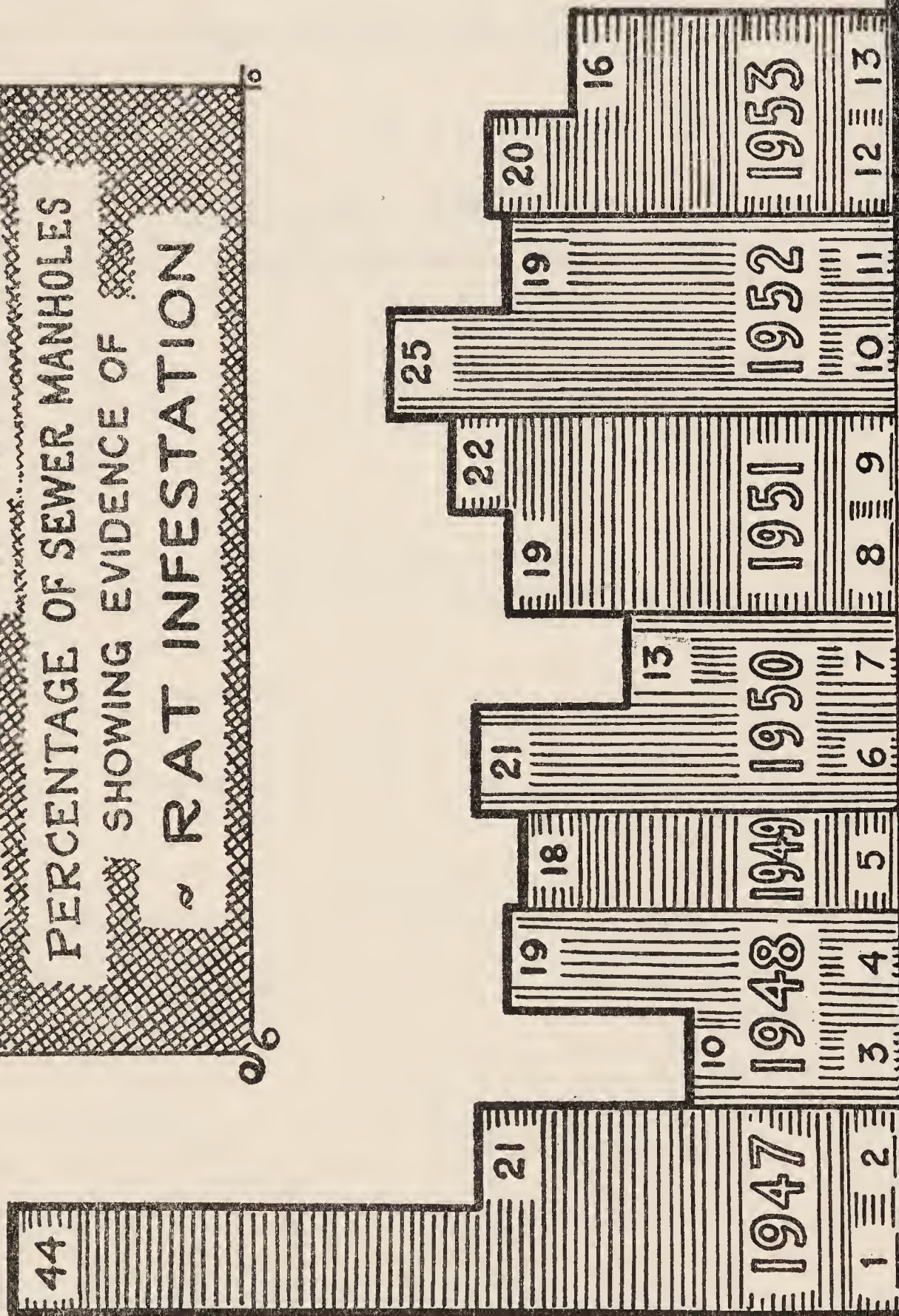
## Baiting

Non-poisonous baits laid	-	-	-	-	1456
Poisonous baits laid	-	-	-	-	4890
„ „ taken	-	-	-	-	3354



# RAT INFESTATION OF SEWERS

## PERCENTAGE OF SEWER MANHOLES SHOWING EVIDENCE OF RAT INFESTATION



TREATMENTS



BOROUGH OF SWINDON



EDUCATION COMMITTEE

as at 31st December, 1953.

HIS WORSHIP THE MAYOR  
(Alderman HAROLD WHITESIDE GARDNER)

**Chairman:** Alderman R. G. CRIPPS

**Vice-Chairman:** Councillor L. J. NEWMAN

**MEMBERS**

Alderman	H. DIMENT	Councillor	J. G. GAY
„	H. THORPE	„	Mrs. L. A. GRIFFIN
Councillor	A. M. BENNETT	„	H. G. LEWIS
„	F. E. BISHOP	„	C. S. MacPHERSON
„	G. BOND	„	R. E. WHITE
„	H. BOND	Mr.	F. W. HAWKSWORTH
„	J. BOND	Mr.	F. SMITH (N.U.T.)
„	A. J. BOWN	Miss	F. H. SHALLCROFT
„	A. W. J. DYMOND		

W.C.C.

Mr. H. W. MOUNTFORD

Mrs. C. ORMOND

Dr. O. D. GILMORE

Mr. F. M. TAYLOR

**BOROUGH EDUCATION OFFICER**

Mr. G. JELLCOE, M.A. (Oxon)



**To the Chairman and Members of the  
Education Committee of the Borough of Swindon.**

Ladies and Gentlemen,

I have much pleasure in submitting the Annual Report for 1953 on the work of the School Health Service in Swindon.

Generally, the state of health and nutrition of the school children remained good, and compared favourably with the findings over the country as a whole. The dental health of the children is, however, a matter of deep concern. Owing to the lack of school dental surgeons, routine inspection and conservative treatment of teeth has been impossible. While there is no doubt that many parents are actively interested in the state of their children's teeth and have had the necessary treatment carried out by their own dentists, there are many others who are not so concerned, and unless the need for treatment is pointed out and treatment offered, the children's teeth will be neglected. In later years, this failure to secure early attention is bound to be reflected in a general lowering of the dental condition of the population.

It seems, therefore, that unless there is some added inducement or compulsion to secure recruits to the School Dental Service, the National Health Service Act, by tempting dental officers into the more remunerative field of general dental practice, is to a certain extent defeating its own object.

I would like to draw your attention to the section of this report dealing with the Spastic Unit. Although the Unit must still be considered experimental, I am convinced that already it has proved to be of real benefit both to the children and to their parents, in spite of the limitations of the premises. In large measure, the success of the Unit is due to the enthusiasm and devotion of the teacher, Miss Barham, and of the staff of the Physiotherapy Department of the Swindon & District Hospital Management Committee. It is to be hoped, therefore, that as the Unit is achieving its object in the care of these severely handicapped children, the Ministry of Education will grant it recognition as a Special School or Class.

I am,

Your obedient servant,

**JAMES URQUHART,**

School Medical Officer.

CIVIC OFFICES,  
SWINDON.

## SCHOOL MEDICAL SERVICE



### SUMMARY OF STATISTICS

A summary of the principal statistics for the year 1953, with comparable figures for 1952, is given below:—

	1953	1952
Number of primary and secondary school children on register (at 22nd January, 1954) -	11,200	10,882
Number of children examined at routine medical inspection - - - -	3,795	2,526
Number found to require treatment for diseases and defects - - - -	855	507
Number of dental inspections - - - -	Nil	1,959
Number referred for dental treatment - -	Nil	1,472
Number of children examined for part-time employment - - - -	111	142

### SCHOOL POPULATION

The estimated population of the Borough of Swindon at mid-year 1953 was 69,030. There were at the end of 1953 a total of 11,200 children on the registers of the primary and secondary schools of Swindon (including the Central Primary School). It will be noted that this is an increase of 318 over the school population at the end of 1952.

### STAFF

#### 1. Medical

Dr. W. B. A. Smyth, Deputy Medical Officer of Health, left on 31st March, 1953. Dr. C. W. Shearer, Deputy Medical Officer of Health, commenced duties on 28th April, 1953.

#### 2. Dental

Mrs. Benson left on 30th April, 1953.

#### 3. School Nurses

Mrs. M. A. Powell commenced duties on 1st October, 1953.

### MEDICAL EXAMINATIONS

During the year, periodic medical examinations were carried out in accordance with the Handicapped Pupils and School Health Service Regulations, 1945. In addition to these periodic examinations, the practice of examining pupils on admission to the secondary grammar schools was continued.

The findings at medical inspection are given in the table on page 56.

The following gives the number of primary and secondary school children examined and the periodic age groups and the number found to be suffering from diseases and defects (excluding dental caries and uncleanness) which required some form of treatment.

	1953	1952	1951	1950	1949
No. of children examined	3,795	2,526	3,291	2,319	2,897
No. of children found to have defects - -	855	507	746	585	602
Percentage of children examined in need of treatment - .	22.5	20.0	22.6	25.3	20.7

Of the 3,795 children examined at routine medical inspections, there were 368 (or 9.7%) defects of vision and 732 (or 19.2%) defects of ear, nose and throat.

### NUTRITIONAL STATE

The Ministry now recognises three categories relating to the general condition of a child, viz:—

- A — Good
- B — Fair
- C — Poor

A table, showing the number and percentage of children placed in each of these three categories for each age group examined during 1953 and 1952 is given below:—



Age Group		No. of children Inspected	Category A		Category B		Category C	
			No.	%	No.	%	No.	%
Entrants	1953	1,961	997	50.84	960	48.95	4	.2
	1952	888	418	47.1	463	52.1	7	.8
Second Age Group	1953	794	366	46.09	424	53.4	4	.5
	1952	829	461	55.6	368	44.4	—	—
Third Age Group	1953	597	350	58.63	241	40.37	6	1.0
	1952	642	448	69.8	191	29.74	3	.46
Other Periodic Inspections	1953	443	203	45.82	240	34.18	—	—
	1952	167	73	43.7	94	56.3	—	—
TOTAL	1953	3,795	1,916	50.49	1,865	49.14	14	.37
	1952	2,526	1,400	55.4	1,116	44.2	10	.4

### Comments:—

It is highly satisfactory that the percentage of children placed in Category C (poor general condition) remains very low. As compared with 1952, there was a small decrease in the percentage classed in Category A and a corresponding increase in Category B, but these variations are probably of little significance.

## CLEANLINESS

During 1953, the School Nurses carried out a total of 22,871 inspections for uncleanness, and a total of 242 individual children were reported as infested.

## MINOR AILMENT CLINICS

Minor Ailment clinics are held at the following places and times:—

### Eastcott Hill

Monday to Saturday inclusive

### Time

9-0 a.m. to 12-30 p.m.

### Dr. in attendance

Monday, Friday and Saturday

### Pinehurst

Monday to Friday inclusive

9-0 a.m. to 12-30 p.m.

Tuesday

In all, some 8,909 attendances were made at these clinics during the year. There were 2,918 consultations with doctor.

### OBSERVATION CLINICS

The practice of holding special observation clinics was continued. Children who are found at a periodic or special medical examination to have any defect which, while not severe enough for reference to a specialist, requires special observation, are seen at these clinics and reviewed.

During 1953, a total of 336 consultations were held at observation clinics.

### OTHER MEDICAL INSPECTIONS

Special medical inspections and re-inspections were carried out on 1,413 primary and secondary school children. The figures for 1952 and 1953 are as follows:—

		1953	1952
Number of inspections	- -	1,413	1,655
Number of re-inspections	- -	1,585	1,440

An analysis of the 1953 and 1952 figures is given below:—

		1953	1952
Number seen for skin conditions	-	920	900
„ „ „ eye „	-	97	288
„ „ „ school accidents	-	39	45
„ „ „ ear defects	-	16	63
„ „ „ throat or nose defects	-	51	101
„ „ „ juvenile employment	-	111	142
Others	- - - -	179	116
TOTAL		1,413	1,655

### PLANTAR WARTS

An investigation into the incidence of plantar warts in certain schools was carried out in 1950 and 1951. As it was thought that the communal use of 'gym' shoes in schools was a factor in the spread of infection, arrangements were made for the periodic disinfection of these shoes, and thereafter they were reserved for individual use only.

A further survey was begun in November, 1953, and by the end of the year, foot inspections had been carried out in five schools (grammar and secondary modern) with the following results:—

	No. of children examined	Warts found in:			
		Boys	Girls	Total	%
Schools surveyed in 1953	2,010	12	25	37	1.8
Corresponding schools in 1950—51	1,380	16	42	58	4.2

The incidence of these warts was thus found to be substantially less in 1953 than three years previously.

The communal use of 'gym' shoes was not permitted in any of the schools surveyed in 1953. No association could be found between the incidence of warts and either (a) the use of school showers or (b) the use of the swimming baths.

The investigation of this problem is continuing.

### CONSULTANT CLINICS

The Consultant clinics in Swindon have been the responsibility of the Oxford Regional Hospital Board since July, 1948. Any child found on examination by a school medical officer to need hospital treatment or a consultant's opinion is referred to the appropriate clinic. In every case, the family doctor is notified of the intention to refer children to these clinics, and is given the opportunity to deal with the case himself if he so desires.

The only consultant clinic now held on Local Authority premises is the Ophthalmic Clinic at the School Clinic, Eastcott Hill.

**Ophthalmic Clinic.** Consultant clinics continue to be held at the school clinic, Eastcott Hill, with clerical and nursing staff provided by the Health Department.

	1953	1952
Number of clinics held	-	-
Number of children attending	77	74
Number of attendances	723	556
	1,297	1,095

The waiting list for this clinic remained very long. Representations were made to the Hospital Management Committee, and it is hoped that the position will improve when additional staff are appointed.

At the end of December, 1953, the position was as follows:—

Number of cases referred and not seen	-	201
Number of cases already seen and referred for re-examination:		
in three months	-	54
in six months	-	246
in one year	-	70



**Orthopaedic Clinic.** Since May, 1950, the Orthopaedic Clinic has been run by the Regional Hospital Board at St. Margaret's Hospital. 155 cases were referred during 1953 to the clinic by the School Medical Services as compared with 149 in 1952. As this department no longer arranges the appointments at this clinic, we have no actual knowledge of the total number of Swindon school children referred there from all sources. Attendances during the year were 292 at Surgeons' Clinics and 47 at Sisters' clinics.

**Ear, Nose and Throat Clinics.** 153 children were referred to this clinic by School Medical Officers during 1953 as compared with 111 in 1952. The waiting lists for consultation and operation continued to be very long. This was partly due to the fact that tonsillectomy operations were discontinued for some months owing to the outbreak of poliomyelitis.

Co-operation with the hospital authorities as regards ear, nose and throat cases was good. Any child considered by a School Medical Officer to require urgent treatment was given special consideration, and the Health Department was notified of all discharges of children from the ear, nose and throat wards, so that follow up visits could be made by a health visitor.

**Paediatric Clinic.** 62 children were referred to this clinic by School Medical Officers in 1953 as compared with 41 in 1952. As in 1952, the children were seen with little delay, and full reports were sent by the consultant to the School Medical Officer. The consultant also sends us a report on any school child referred to him for consultation from other sources.

## SPECIAL CLINICS

**Remedial Exercises.** During 1953, those children found to be in most urgent need of remedial exercises were referred to the Orthopaedic Clinic. Many of these were sent for outpatient treatment at the Physiotherapy Department under the supervision of the Consultant in Physical Medicine. Only the more serious cases can be dealt with in this way, and it is known that many children with milder defects (mainly poor posture and flat feet) would benefit from remedial exercises. Approval was granted in 1953 for the appointment of a full-time remedial gymnast for Swindon, the appointment to be made in 1954.

**Child Guidance Clinic.** The Child Guidance Clinic set up by the Wiltshire County Council continued to hold regular sessions at 81, Bath Road, Swindon.

A report on the Child Guidance Service by Mr. H. R. Melrose, Educational Psychologist, is appended to this report.

**Speech Therapy.**

Number of children treated—Boys	60		
Girls	23		
	—		Total 83
Number of attendances	-	-	- 576

Considerable headway has been made in the first full year of the extended Speech Therapy Service in Swindon. Although the work is not completely covered, it is reasonably well under control. Treatment is still mostly individual, but small groups are treated where the child needs to learn self confidence among his fellows or where he responds to the stimulus of companionship.

The range of types of defect treated is much the same as last year, although the number of cleft palate cases dwindle with the increasing efficiency of palate repair. A number of very young children with baby speech have been left for periods of six months to a year without direct treatment and with only occasional reassurance to parents, as their speech frequently matures unaided.

The Spastic Unit has been visited twice weekly, and most of the treatment towards the end of the year has been individual. Miss Barham, the teacher, has been present during all class treatment, and has been most swift to learn and apply methods used in speech therapy for group work with spastics.

— The waiting list is still very long, but quite a number of the children have been seen at school and fall into the group of infants with delayed speech, and may never need prolonged speech therapy. Most children are now seen within six months of referral.

A number of children have been referred to the Child Guidance Clinic and have received treatment there at the same time as having speech therapy. Advice from Dr. Smith and Mr. Melrose has been a great help in both diagnosis and determining methods of treatment in speech therapy.

**HANDICAPPED PUPILS**

1. **Blind Pupils**, (that is to say, pupils who have no sight or whose sight is or is likely to become so defective that they require education by methods not involving the use of sight). One Swindon blind girl has been in a Special School for the blind at the Royal School of Industry for the Blind, Westbury-on-Trym, since 19-5-45. No new pupils were assessed during 1953, and there are none awaiting admission to a Special School for the blind.

2. **Partially Sighted Pupils**, (that is to say, pupils who by reason of defective vision cannot follow the normal regime of ordinary schools without detriment to their sight or to their educational devel-



opment, but can be educated by special methods involving the use of sight). Two boys aged 10 years have been at the West of England School for Partially Sighted Pupils since September, 1952. Two Swindon school children were admitted to the West of England School for Partially Sighted Pupils during 1953. No new pupils were assessed during 1953, and there are none awaiting admission to a special school for partially sighted pupils.

3. **Deaf Pupils**, (that is to say, pupils who have no hearing or whose hearing is so defective that they require education by methods used for deaf pupils without naturally acquiring speech or language). Four Swindon children deaf from birth are attending special schools as follows:—

- 1 boy at Donnington Lodge Nursery School since January, 1950.
- 1 girl at Royal Institute for Deaf, Derby, since September, 1950.
- 2 girls at Royal Institute for Deaf, Derby, since 1947.
- 2 Swindon school children were admitted to a Special School for Deaf Pupils during 1953.
- 1 Swindon child is still awaiting admission to a Special School for Deaf Pupils.

No new pupils were assessed during 1953.

4. **Partially Deaf Pupils**, (that is to say, pupils who have some naturally acquired speech and language but whose hearing is so defective that they require for their education special arrangements or facilities though not necessarily all the educational methods used for deaf pupils). No child was ascertained as partially deaf during 1953, and there are none awaiting admission to a special school for partially deaf pupils.

5. **Educationally Sub-normal Pupils**, (that is to say, pupils who, by reason of limited ability or other conditions resulting in educational retardation, require some specialised form of education wholly or partly in substitution for the education normally given in ordinary schools). During 1953, 25 new cases were examined and were grouped as follows:—

- 13 were recommended education in a Special Day School for Educationally Sub-normal Pupils.
- 11 were recommended special educational treatment in an ordinary school.
- 1 was recommended for normal education.

43 children already assessed as educationally sub-normal were re-examined during the year and the following recommendations were made:—

- 6 to be admitted to a Special Day School for Educationally Sub-normal pupils.
- 14 to continue to receive education at a Special Day School for Educationally Sub-normal pupils.



5 to continue to receive special educational treatment in an ordinary school.

2 to return to the ordinary school system.

5 for friendly supervision of the Mental Health Authority after leaving school.

7 were notified under Section 57(5) of the Education Act, 1944.

4 were reported to the Local Health Authority as ineducable.

At the end of 1953, children assessed as educationally sub-normal were receiving special education as follows:—

Special Day School	-	-	-	-	62
Special Residential Schools	-	-	-	-	4

6. **Epileptic Pupils**, (that is to say, pupils who by reason of epilepsy cannot be educated under the normal regime of ordinary schools without detriment to themselves or other pupils). One Swindon school child was ascertained as epileptic during 1953, and a recommendation was made for him to attend a special school for epileptic pupils. 20 children are attending ordinary schools without detriment to themselves or others, and are under regular medical supervision and treatment.

7. **Maladjusted Pupils**, (that is to say, pupils who show evidence of emotional instability or psychological disturbance, and require special educational treatment in order to effect their personal, social or educational readjustment).

One boy aged 13 was admitted to Cam House, Dursley, Gloucester, in September, 1953

One boy aged 15 was admitted to Finchden Manor, Tenterden, Kent, in April, 1953.

8. **Physically Handicapped Pupils**, (that is to say, pupils not suffering solely from a defect of sight or hearing who by reason of disease or crippling defect cannot, without detriment to their health or educational development, be satisfactorily educated under the normal regime of ordinary schools).

One girl aged 13 has been at Dame Hannah Rogers School for Physically Handicapped since 1950.

One boy aged 9 is awaiting a vacancy at a special school for physically handicapped pupils.

2 children were receiving home tuition at the end of 1953.

4 children were attending at the Swindon Spastic Unit.

9. **Pupils suffering from Speech Defect**, (that is to say, pupils who on account of defect or lack of speech not due to deafness require special educational treatment). No children have been ascertained as handicapped on account of speech defect.

10. **Delicate Pupils**, (that is to say, pupils not falling under any other category in this Regulation, who by reason of impaired physical condition need a change of environment or cannot, without risk to their health or educational development, be educated under the normal regime of ordinary schools).

1 girl classified under this category has been a pupil at Hutton Residential School since January, 1949.

1 boy aged 14 was admitted to Hamilton House, Sleaford, for a period of three months.

1 boy was recommended for an open air school for delicate children, but the parents opposed his admission.

### SPASTIC PARALYSIS

The Spastic Unit continued to function in the Regional Hospital Board's premises at the Physiotherapy Department, Community House, Faringdon Road.

At the end of 1953, there were 9 pupils on the roll, their ages ranging from 6 to 16 years. Four of these children were from Swindon, and five from the surrounding areas. Most of the children attended for the whole day, five days a week, though some were able to attend in the mornings only.

The Education Committee provide the teacher, the teaching facilities and equipment. Representations were made to the Ministry of Education that the Unit should be recognised as a special school or class, but so far, the Ministry has refused to grant such recognition, and consequently, the children attending the Unit cannot obtain school meals at reduced prices, or school milk.

The services of the Consultant in Physical Medicine, Dr. J. B. Stewart, and his staff, are available to the children attending the Unit. The speech therapist attends for one session per week.

The parents of the children attend voluntarily in rotation to help in the general management of the children.

In July, 1953 the children were medically inspected by a school medical officer. In all cases, marked improvement in the children's condition was reported by the parents, especially as regards speech, ability to relax, and in the use of the hands. Particularly, the parents remarked on the fact that with the interests created for the children at the Unit, plus the improved sleep and relaxation, the children were much happier and easier to handle at home. This in turn has relieved the parents of considerable strain and anxiety, and has added greatly to the happiness of the household.

Practical evidence of the enthusiasm of the parents over the benefits of the Unit is seen in the fact that the voluntary rota system of attendance of parents at the Unit has never broken down since the Unit opened in December, 1952.



## PHYSICAL WELFARE OF CHILDREN

### Milk in Schools Scheme.

The results of a survey taken on one day in October, 1953, are as follows (figures in brackets represent a similar survey taken on one day in October, 1952).

### Survey taken on one day in October, 1953.

Total number primary children taking milk 5,957, representing 85.66% of children attending school at the time. (5,917 representing 85.27%).

Total number secondary children taking milk 2,543, representing 70.17% of children attending school at the time. (2,167, representing 66.55%).

Total number Central Primary children taking milk, 40 representing 74.7% of children attending school at the time. (36, representing 83.72%).

Number of school departments supplied is 37.

All milk supplied to schools is sampled at regular intervals, and any complaints regarding it are reported to the office for action.

### Meals in Schools.

I am indebted to the Education Officer for the following details of the numbers of school children having school meals.

		1953	1952
Number of school canteens	-       -	25	37
Number of children taking meals	-	1,975	2,275
Number of children taking free meals	-	221	405



# **A RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1953, WITH COMPARABLE FIGURES FOR 1952.**

Defect or Disease	Periodic Inspections No. of defects			Special Inspections No. of defects		
	Requiring treatment		Requiring to be kept under observation but not requiring treatment	Requiring treatment		Requiring to be kept under observation but not requiring treatment
	1953	1952		1953	1952	
Skin -	35	36	32	406	909	1
Eyes:—						
a. Vision -	320	233	26	107	139	1
b. Squint -	79	52	6	6	4	1
c. Other -	13	13	11	99	297	1
Ears:—						
a. Hearing -	14	6	7	16	14	—
b. Otitis Media -	6	15	8	1	2	1
c. Other -	33	7	4	108	209	—
Nose or Throat -	193	95	151	180	304	3
Speech -	20	9	15	4	4	2
Cervical Glands -	6	4	60	45	49	—
Heart & Circulation -	14	7	69	7	10	3
Lungs -	65	29	45	13	31	8
Developmental:—						
a. Hernia -	9	—	4	1	3	2
b. Other -	12	2	40	15	6	3
Orthopaedic:—						
a. Posture -	13	24	16	—	2	—
b. Flat foot -	35	32	42	1	3	1
c. Other -	79	39	58	6	8	3
Nervous system:—						
a. Epilepsy -	10	6	4	3	3	—
b. Other -	3	6	17	15	11	2
Psychological:—						
a. Development -	11	9	7	6	12	4
b. Stability -	7	6	2	6	12	3
Other -	40	14	53	463	1638	16

### Child Guidance.

The Child Guidance Service has continued to hold regular sessions at 81, Bath Road, Swindon, on Thursday of each week during the school term times. The composition of the Child Guidance Team has continued to be:—

Dr. K. C. P. Smith—Consultant Psychiatrist

Mr. H. R. Melrose—Educational Psychologist

Miss N. P. Comber—Social Worker.

Miss H. Copping—Clerical Assistant (until 29th August)

Miss J. M. C. Dalton—Clerical Assistant (from 21st Sept.)

As in previous years, County children living in the Highworth, Malmesbury, Wootton Bassett, Marlborough and Stratton St. Margaret areas have also been seen at the Centre.

### Case Load

During 1953, 50 new cases were referred by the Principal Borough School Medical Officer, all of whom were seen by the Psychologist, and the homes were visited by the Social Worker, and forty-one of these were passed to the Psychiatrist. Of these forty-one, ten were closed as improved, and the remaining thirty-one were carried forward to 1954 for further treatment. The nine children seen by the Psychologist only were cases of limited intelligence or of specific educational difficulties, who were recommended for special educational treatment as educationally sub-normal pupils.

In addition, thirty-one children who had been seen first in 1952 and carried forward to 1953, were also treated, and of these sixteen were discharged as improved, and fifteen were carried forward to 1954. Thus, in all, forty-six (31 + 15) children will be attending the Centre again in 1954.

During 1953, the Psychiatrist carried out two hundred and fifteen therapeutic interviews with children and their parents, usually their mothers. Sixteen children have taken part in eighty-four play therapy sessions under the observation of the Social Worker. The Psychologist has undertaken seventy-seven interviews for the assessment of intelligence and educational attainments with, in some cases, subsequent remedial interviews.

### Children's Problems

The problems for which the fifty new children were referred are summarised under the following heading, and comparison is made with the previous years 1952 and 1951:—

	1953	1952	1951
1. Nervous Disorders - - -	1	6	2
2. Habit Disorders and Physical Symptoms	22	17	9
3. Behaviour Disorders - - -	13	14	19
4. Educational and Vocational Difficulties	14	10	5
	—	—	—
	50	47	35
	—	—	—

Habit disorders and physical symptoms continue to be in the majority, largely because of the number of cases of speech defects, chiefly stammerers, referred by the Speech Therapist, who has stated in her Annual Report that there are a large number of speech defectives in the Borough.

### Ages of Children

The distribution of the ages of the children referred is as follows:—

Ages	2 yrs. & under	3	4	5	6	7	8	9	10	11	12	13	14	15	16 & over	Total	Year
Children	0	1	1	4	5	3	5	10	4	4	2	4	6	1	0	50	1953
Children	1	1	0	3	2	3	8	6	9	4	2	3	3	2	0	47	1952
Children	1	2	2	1	3	0	1	4	3	7	2	4	3	2	0	35	1951

The majority of children referred fall in the age ranges 6 to 9 years and 13 to 14 years.

### Intelligence of Children

The distribution of intelligence of the children referred is as follows:—

I.Q.	Below Average			Average		Above Average			Total	Year
	54 & below	55-70	71-85	86-100	101-115	116-130	131-145	145 & over		
Children	2	3	8	11	15	8	3	0	50	1953
„	1	2	10	9	17	7	1	0	47	1952
„	1	4	8	9	8	5	0	0	35	1951
Percentage	4	6	16	22	30	16	6	0	100	1953
„	2	4	21	20	36	15	2	0	100	1952
„	3	11	23	26	23	14	0	0	100	1951

Below Average	Average	Above Average		
26%	52%	22%	—	1953
27%	56%	17%	—	1952
37%	49%	14%	—	1951

The welcome tendency noted in 1952 to refer more children of higher intelligence with problems, 22% as compared with 17% and 14% in 1952 and 1951, has continued. Children falling in the below average group of intelligence primarily require some form of special educational treatment, which, despite some progress during the last few years, is still by no means adequate to cope with the demand. Such special educational treatment for educationally sub-normal children does not necessarily presuppose the setting up of special schools, but can often be provided within the ordinary schools, as was envisaged in the Education Act 1944.



## Conclusion

The members of the Child Guidance Team would like to thank Dr. James Urquhart, Principal Borough School Medical Officer, and his staff, for their effective and kindly assistance in the administration of the Centre. Mr. Melrose would particularly like to put on record his thanks for the unfailing co-operation of the head teachers in rendering reports, and on their willingness to discuss the difficulties of the children referred.

## SCHOOL DENTAL SERVICES

In April, 1953, Mrs. Benson, the only Dental Officer on the staff, resigned. In spite of repeated advertisements, there were no applicants for the posts advertised. Thus, children who applied for treatment at the clinics were referred either to their own dentists or to the dental officers at the Health Centre.

From December 7th, by arrangement with the County Medical Officer, the services of Mr. Randerson, Assistant County Dental Officer, were made available to us for two sessions per week. At these sessions, it was possible to treat only emergency cases and those found at school medical inspections to be in urgent need of dental treatment.

As is seen in the table following, it was not possible to carry out periodic dental inspections in 1953.

### DENTAL INSPECTION AND TREATMENT CARRIED OUT DURING THE YEAR 1953

(1) Number of children inspected by the Authority's Dental Officers:—				
(a) Periodic age groups	-	-	-	—
(b) Specials	-	-	-	—
			Total (1)	—
(2) Number found to require treatment	-	-		—
(3) Number referred for treatment	-	-		—
(4) Number actually treated	-	-		549
(5) Attendances made by pupils for treatment	-			1,547
(6) Half-days devoted to: inspection	-	-		—
treatment	-	-		167
			Total (6)	167

(7)	Fillings: Permanent teeth	-	-	-	379
	Temporary teeth	-	-	-	141
	Total (7)				520
(8)	Number of teeth filled: Permanent teeth	-			379
	Temporary teeth	-			141
	Total (8)				520
(9)	Extractions: Permanent teeth	-	-	-	233
	Temporary teeth		-	-	747
	Total (9)				980
(10)	Administration of general anaesthetics for extraction	-	-	-	407
(11)	Other operations: Permanent teeth	-	-		156
	Temporary teeth		-	-	246
	Total (11)				402

### PROTECTION OF SCHOOL CHILDREN AGAINST TUBERCULOSIS

The Mass Radiography Unit visited Swindon in 1953, and facilities for examination were offered to all the senior pupils attending schools in the Borough. The number of children examined and the results are shown in the following table:—

Number of children aged 14 and upwards on the school rolls	-	-	-	-	1,452
Number of children examined	-		-	-	1,304
Percentage response	-	-	-	-	89.8
Number of children recalled for full-size x-ray	-				35
Number of children recalled for clinical examination	-	-	-	-	5

### MEDICAL EXAMINATION OF ENTRANTS TO COURSES OF TRAINING FOR TEACHING AND TO THE TEACHING PROFESSION

In accordance with Ministry of Education Circular 249, candidates applying for admission to training colleges are examined by the School Medical Officers of the areas where they live. This procedure was adopted as from 1st April, 1952.

During 1953, 26 examinations of such candidates were carried out by the School Medical Officers in Swindon.

### **THE CHILDREN ACT 1948**

Boarded-out children attending school in the Borough are examined annually by the School Medical Officers as required by the Act.

During 1953, 52 such examinations were made.

### **SCHOOL PREMISES**

School premises, including school meal kitchens, are inspected by the Medical Officers at the conclusion of routine medical inspections. Any defects noted are reported to the Education Committee.





## **REPORT OF THE AREA MEDICAL OFFICER**

I have pleasure in submitting the report of the Area Medical Officer of Swindon for the year 1953.

This report deals exclusively with the services provided under Part III of the National Health Service Act, 1946, which have been delegated to the Area Sub-Committee.

During the year, the work and administration of the Area Services has gone ahead smoothly, and the co-operation received from all departments of the County Council has been most encouraging. In particular, I would like to pay tribute to the County Medical Officer of Health, Dr. J. Burman Lowe, for his help and guidance in all matters pertaining to the Area of Swindon, and I would like to take this opportunity of wishing him well in his retirement.

During the year, the increased establishment of domiciliary nurses and domestic helps has enabled us to give a more comprehensive and better service to the people of the town, and has resolved many of the problems with which we were confronted in previous years.

## **CO-ORDINATION AND CO-OPERATION WITH OTHER PARTS OF THE NATIONAL HEALTH SERVICE**

To achieve the object of the National Health Service Act, 1946, to provide a comprehensive Health Service, there must be active and willing co-operation between all the services which provide for the welfare of the population. I think it can truthfully be said that the Local Health Authorities have taken the lead in this matter, but circulars have from time to time been issued through the Hospital Services machinery indicating ways in which closer unity with other health services can be achieved, and in Swindon during the year there has been a good measure of active co-operation with hospital services. The Medical Officer of Health being a member of the Swindon and District Hospital Management Committee helps considerably towards this objective and their Chronic Sick Sub-Committee includes, also, representatives of other bodies concerned with the care of the aged. In this way there is between the hospitals and Local Authority some official and continuing method of achieving a comprehensive service.

On the other hand, there is in Swindon no such local machinery for achieving co-operation with the general practitioner services. There is, however, contact with the practitioners through medical societies and through personal contacts.

It is my opinion that many of the obstacles lying in the way of complete co-operation result from the ignorance of individual personnel in one branch of the service of the work of other branches of the services. I believe that only by ensuring that each individual in the health service is taught and is allowed to see the workings of all branches of the service will complete co-operation be achieved.

In Swindon, the general practitioners are in direct contact with the district nurses and work in close co-operation with them. Again, the hospital sisters and almoners do liaison directly with the district nurses. It is felt, however, that with the present staff of health visitors, it is difficult for them to be allocated to work in direct liaison with individual doctors or group of doctors. The general practitioners have, however, been encouraged to make use of the very valuable services of the health visitors, and in any case, the doctor can, through the Health Department, be told which health visitor to contact. As in past years, the hospital almoners have direct contact with the senior health visitor, and they have worked together happily. Again, the health visitors have direct contact with the various voluntary bodies whose work concerns the welfare of the community as a whole.

Finally, then, I would say that while in Swindon we have achieved some measure of co-operation between all branches of the health service, I feel that there is room for much greater and closer liaison between the individual members of each service.

### **JOINT USE OF STAFF**

The only hospital specialist clinics now held on local health authority premises are the eye clinics, one for premature infants and the other for children up to school-leaving age.

Up to 31st July, 1953, two general practitioners attended weekly ante natal clinics. Since that date, when one of these practitioners left the town, the clinic is attended by Dr. C. W. Shearer. If, for some reason, one of these doctors is unable to attend the clinic, the consultant obstetrician, Dr. Roworth, has always made the services of one of his medical officers available.

From time to time, hospital residents and general practitioners studying for higher degrees have been permitted to attend at any of the Local Health Authority clinics.

### **VOLUNTARY ORGANISATIONS**

The Old People's Welfare Committee is now in its second year of office, and is doing very valuable work among the aged of the community. Close liaison is maintained between this Committee and the Health Department.

I would also like to thank the local W.V.S. and other organisations who have given very valuable and willing help in many different ways.

### **CARE OF PREMATURE INFANTS**

A premature baby unit is housed in the Swindon Maternity Hospital. When a premature infant is born at home, it is transferred with the mother to the hospital if the case warrants such admission. Before a premature infant is discharged home from the hospital, this



department is asked by the hospital to ascertain whether the home is satisfactory for the care of such a child. Close co-operation in all matters relating to premature children is maintained between the hospital and the Health Department, and no difficulties have been encountered during the year.

Number of premature babies born:—

(i) At home	-	-	-	-	24
(ii) In hospital or nursing home	-	-	-	-	60

Number who died during the first 24 hours:—

(i) Born at home	-	-	-	-	—
(ii) Born in hospital or nursing home	-	-	-	-	2

Number who survived at end of one month:—

(i) Born at home	-	-	-	-	22
(ii) Born in hospital or nursing home	-	-	-	-	55

### **SUPPLY OF DRIED MILKS, ETC.**

At the child welfare clinics one of our clerical staff attends, and among her other duties is the sale of dried milks and nutrients. During the year there were 3,847 such sales, for which £516-5s.-9d. was received.

Representatives of the Food Office attended at Moredon, Pinehurst, Gorse Hill and Bath Road child welfare clinics for the sale of National Welfare Foods, and I am informed that there was a steady demand for these commodities.

### **DENTAL CARE**

At the end of 1952 we lost the services of one of our dental officers, and the remaining one, Mrs. Benson, resigned in April, 1953. In spite of repeated advertisements and the fact that the Swindon Borough Council agreed to make houses available for them, no applications for the posts were received. In December, 1953, the services of one of the county dental officers, Mr. Randerson, were made available to Swindon for two sessions per week, which had to be devoted to emergency work.

It seems that there will be no solution to this problem until the remuneration of dental officers in local authority service is comparable with that under the National Health Service.

### **DOMICILIARY MIDWIFERY**

There are six domiciliary midwives employed in Swindon who, during the year, attended at 506 confinements. All of these are qualified to administer gas and air analgesia, and five were at the end of the year approved as teachers of pupil midwives. The pupil midwives come from the Swindon Maternity Hospital and from Bradford-on-Avon Maternity Hospital. During the year, fourteen completed their training, and at the end of the year five pupils were still working in the district. Non medical supervision of the midwives is carried out by a nursing officer from County Hall.

There are no domiciliary midwives in private practice in the town.

As can be seen from the table on page 71, the percentage of domiciliary confinements in the town is maintained, and is, in fact, increasing. It is hoped to recruit two more personnel in 1954, but it is felt that, even with the aid of the pupil midwives, the pressure of work on the midwives is such that an increase in establishment is needed. In order to facilitate the recruitment of staff, plans are now being made to provide special housing for nurses on the new estate at Penhill.

The domiciliary midwives hold booking clinics in two centres in the town, and carry out ante-natal supervision at these clinics in addition to domiciliary visiting. Each midwife is aware of the procedure for summoning medical aid or the hospital "Flying Squad" in cases of emergency, and in all, medical aid was summoned for 100 cases during the year.

The system of co-operation between the Local Authority and the Maternity Hospital in respect of cases applying for hospital admission where there are no medical indications for such admission continues to work satisfactorily. The health visitors investigate all such cases and an assessment is made of the social needs before recommendations are forwarded to the hospital authorities. When new facts relating to the circumstances of a case come to be known, the recommendation is again reviewed in the light of the new information. No difficulty is met with from the hospital authorities if we decide to alter the recommendations already made.

## HEALTH VISITING

In October, 1952, approval was given to increase the establishment of health visitors in Swindon to one senior and eight health visitors. Although the previous strength of health visitors has been maintained, no applicants have been forthcoming to fill the vacancy. As the health visitors also act as school nurses, our equivalent whole-time staff of health visitors is four.

Each year since the inception of the National Health Service Act, it seems that the scope and duty of the health visitors has increased. While every effort is made to maintain the routine visits to infants and young children, it is often most difficult to ensure that first visits to babies are made on the day the mother returns from hospital or on the day after the domiciliary midwife ceases her after-care.

The vacant appointment is particularly for a health visitor whose main duties would be the investigation of social circumstances concerning maternity hospital admissions and applicants for domestic help. Since this appointment has not been made, all these investigations have to be shared among the present staff of health visitors, and since many visits made in these circumstances are urgent, the time which can be devoted to routine visits is shortened.



The health visitors attend at all the infant welfare clinics as well as the special hospital eye clinics held on County Council premises. In two instances they run child welfare clinics where no doctor attends.

More and more call is being made by practitioners for the services of health visitors, and every endeavour is made to encourage co-operation between the practitioners and health visitors.

Many visits are being paid in connection with the welfare of old people, and all the health visitors are kept aware of all extensions and developments in the schemes for the welfare of the aged.

In conjunction with the hospital Consultant in Physical Medicine, Dr. J. B. Stewart, arrangements have been made to train all the health visitors in exercises which can be of benefit to old people who are unable to attend the special clinics. This training started in December, and should be completed early in 1954. It is hoped that this scheme will prove of benefit to the old people and enhance the usefulness of the visits paid to them by the health visitors. Refresher courses for health visitors are provided for by the County Council, and it is hoped that a vacancy on one course will be allocated to Swindon next year.

## VACCINATION AND IMMUNISATION

Vaccination and Immunisation clinics continue to be held as in previous years. As well as special clinics held weekly and fortnightly for immunisation and vaccination respectively, these facilities are provided at each child welfare clinic where a doctor is in attendance. It is felt that many parents who would not trouble to attend at special clinics will agree to their children being inoculated if this is offered to them when they attend the ordinary child welfare clinics.

During the year the clinics were interrupted because of poliomyelitis from the middle of July to September. The effect of this is reflected in the number of clinics held and the number of children inoculated as compared with 1952, when there was no interruption in the service.

During the year 129 vaccinations were carried out at the clinics, and the total vaccinations performed by clinics and private doctors is summarised in the following table.

		Under 1 year	1 to 4 years	5 to 14 years	15 years and over	Total
Primary Vaccination	-	219	28	19	37	303
Re-Vaccination	-	—	2	9	71	82
<b>TOTALS</b>	- -	219	30	28	108	385



Immunisation		1953	1952
Number of clinics held	- -	49	76
Number of attendances	- -	909	1,210
Number of children who have completed course	- - -	418	587
Number of children immunised by general practitioners	- -	175	140
Total number immunised	- -	593	727
Re-inforcing injections, including general practitioners	- -	51	121

### PREVENTION, CARE AND AFTER-CARE

The scheme for prevention, care and after-care in Swindon is similar to that for the county as a whole.

The number of persons sent for convalescent holidays during the year was fourteen.

During the latter part of the year facilities for tuberculin jelly testing were made available at the child welfare clinics. This test is applied when the doctors consider there is a suspicion of infection or contact with infection, and in all 33 children were so tested. All proved negative. When a positive test is found the child will be referred to the Chest Physician and the usual routine of investigations carried out.

### DOMESTIC HELP

During the year a total of 30 domestic helps were employed in Swindon.

The demands on this service continue to be very heavy, and it has been impossible to meet all the calls made on it. Apart from maternity cases, who are given priority and whole-time service, other cases are given as much time as the case merits or as much as can be made available. Each household applying for domestic help is visited by a health visitor to assess the need and to help in the completion of the assessment forms. Thereafter, all long-term cases are visited regularly by the health visitor, who reports back any changing circumstances, and the service supplied is adjusted accordingly.

Many cases, especially the aged, prefer to have the domestic help in the mornings, so that they can rest in the afternoons. This request is complied with whenever possible, and the employment of part-time domestic helps facilitate such arrangements.

In November, 1952, the domestic helps came under the conditions of service of the Western District Council for Manual Workers. Soon afterwards, it became evident that there was considerable loss of time through illness, and as the domestic help was now able to draw sick pay, no substitute could be employed during her absence if the service were to be run on the estimated expenditure. Following

a report on this matter, the Committee's decision to encourage the employment of more part-time domestic helps has done much to solve these difficulties and, incidentally, to facilitate recruitment.

## HEALTH CENTRE

### Dental Department

Dental Surgeons	-	2	Dental Attendants	-	2
Dental Technicians	-	4	Dental Receptionist	-	1

During the year there were 10,343 attendances for treatment, and the following work was carried out:—

Scalings	FILLINGS		Extractions	X-rays	DENTURES		Treatments
	Amalgams	Synthetic			Repairs	Manufactured	
251	2,987	248	2,130	637	601	608	4,636

### Pharmacy

The Pharmacy dealt with 121,387 prescriptions during the year.

## CARE OF EXPECTANT AND NURSING MOTHERS

### Ante and Post Natal Clinics

Clinics at which a doctor is in attendance are held weekly as follows:—

Beech Avenue	Mondays	}	1-30 to 4 p.m.
	Fridays		
Bath Road	Mondays		1-30 to 4 p.m.

	1953	1952	1951
Number of women who attended these clinics during the period -	752	731	794
Number of attendances made during the period - - -	3,439	3,078	3,786

In addition to the above clinics, the midwives hold booking clinics at Beech Avenue each Thursday, and at Bath Road on alternate Wednesdays.

The ante natal and post natal clinics at Bath Road are conducted in conjunction with the hospital maternity organisation, and the consultant obstetrician is in charge of the clinical arrangements. One session at this clinic is devoted to obstetrics and others to hospital ante-natal and post natal gynaecological clinics.

At the clinic at Beech Avenue two ante natal clinics are held weekly. Up to August, 1953, these clinics were attended by two general practitioners, but since then the Deputy Medical Officer of Health attends at one clinic session.



Both the clinics at Bath Road and Beech Avenue are well equipped, and afford facilities for full ante natal and post natal examinations. Blood testing is either done at the clinics or at the Pathological Laboratory at Gorse Hill.

The scheme of care for unmarried mothers falls into line with the practice adopted throughout the county.

Maternity Outfits are held in stock at the Health Department, Civic Offices, and issued from there. During the year, 563 such outfits were issued as compared with 526 during 1952. From these figures, it is clear that most mothers whose children are born at home take advantage of this facility.

### INFANT WELFARE CLINICS

The table below gives the list of clinics held and the attendances made:—

Centre	Day and Time 2 — 4 p.m.	Number of consulta- tions with doctor	Number of attend- ances
61 Eastcott Hill ...	Wednesday & Friday	1,477	3,875
Beech Avenue, Pinehurst	Tuesday & Wednesday	650	2,987
Gorse Hill ... ..	Wednesday	—	1,408
Moredon ... ..	Monday	—	1,536
Bath Road ... ..	Friday	600	1,554

With the development of Penhill Estate, the numbers attending the Pinehurst clinic became too great to be dealt with adequately, so an extra session was introduced there on Wednesday afternoons. No doctor attends this clinic. It is hoped that clinic premises at Penhill Farmhouse will be available early in 1954, which should relieve the congestion at Pinehurst.

### DAY NURSERIES

When the scale of charges for day nurseries under the National Health Service Act, 1952, was agreed in November, 1952, it was anticipated that the numbers attending the day nurseries at Pinehurst and Gorse Hill would fall. The fall in attendance, however, was even greater than anticipated, and in May, 1953, of the 65 places available in both nurseries, only 34 were occupied. In June only 24 children were on the register of the nurseries.

As the premises at Pinehurst required extensive repairs, and as the clinic at Gorse Hill could accomodate all the children, the Committee decided to close the former nursery and reduce the staff accordingly. This move was completed in July.

The number of children attending at Gorse Hill nursery has remained fairly constant, and it has been possible to accommodate all applicants for places.



	Number of Nurseries	Number of Approved Places	No. of children on the Register at the end of the year		Average daily attendance	
			0—5	0-2	2-5	0-2
Nurseries maintained by the Council ..	1	25	6	9	4	10

### **FAMILY PLANNING ASSOCIATION**

The Family Planning Association continues to hold clinics at Eastcott Hill clinic weekly.

### **TREATMENT OF INFANTS FOR ORTHOPAEDIC AND OPHTHALMIC DEFECTS**

9 children were referred to the Orthopaedic Clinic at St. Margaret's Hospital.

38 cases attended the Surgeons' sessions and made 97 attendances.

10 cases attended the Sisters' sessions and made 31 attendances.

32 children were seen by the Ophthalmologist, making 54 attendances.

39 cases attended the Premature Baby Eye Clinic and made 126 attendances.

### **MIDWIFERY SERVICE**

The following is an analysis of the midwifery carried out in the area during the year:—

NUMBER OF DELIVERIES ATTENDED BY MIDWIVES IN THE AREA DURING THE YEAR						
	Domiciliary Cases				Totals	Cases in Institutions
	Doctor not booked		Doctor booked			
	Doctor present at time of delivery of child	Doctor not present at time of delivery of child	Doctor present at time of delivery of child (either the booked doctor or another)	Doctor not present at time of delivery of child		
(a) Midwives employed by the Authority ... ..	5	20	125	356	506	—
(b) Midwives employed by voluntary organisations:— (i) Under arrangements with the Local Health Authority in pursuance of Section 23 of the National Health Service Act, 1946 ... ..	—	—	—	—	—	—
(ii) Otherwise (including hospi- tals not transferred to the Minister under the National Health Service Act) ...	—	—	—	—	—	—
(c) Midwives employed by hospital management committees or Boards of Governors under the National Health Service Act ...	—	—	—	—	—	858
(d) Midwives in private practice (in- cluding midwives employed in nursing homes) ... ..	—	—	—	—	—	179

## ADMINISTRATION OF GAS AND AIR ANALGESIA

All six of the midwives are qualified to administer gas and air analgesia.

Analgesia was administered in 337 cases where the midwife acted as such and in 56 cases where the midwife acted as maternity nurse, making a total of 393 administrations in 506 cases.

## MIDWIVES ACT, 1951

Medical Aid was summoned in 100 domiciliary cases during the year.

## HEALTH VISITING

Number of visits paid by Health Visitors (figures for 1952 in brackets):—

Expectant Mothers		Children under 1 year of age		Children between the ages of 1 & 5	Other Classes
First visits	Total visits	First visits	Total visits	Total visits	Total visits
353 (46)	374 (63)	1,105 (1,038)	3,305 (4,314)	3,288 (5,067)	2,243 (1,927)

Number of live births to Swindon residents

during the year - - - 1,148 (1,376)

Number of stillbirths to Swindon

residents during the year - 24 (33)

Included in "Other Classes" in this table are 669 (290) visits to cases of infectious diseases and 409 (509) visits to cases of tuberculosis.



## HOME NURSING

### Details of Work Carried Out by Home Nurses

	No. of Cases
Respiratory diseases (excluding tuberculosis) -	142
Digestive diseases - - - -	119
Heart and Arteries - - - -	86
Veins and other circulatory diseases - -	32
Genito-urinary - - - -	88
Skin - - - -	152
Ear, Eye and other sense organs - -	175
Cancer (and other neoplasms) - -	52
Cerebral lesions of vascular origin - -	36
Infectious and parasitic diseases - -	311
Diabetes - - - -	19
Injuries - - - -	26
Tuberculosis - - - -	26
Bones and organs of movement (mainly rheumatism) - - - -	29
Pregnancy - - - -	26
Mental and other nervous diseases - -	7
Other diseases or ill defined - -	190
Preparation for X-ray examinations - -	35
<hr/>	
Total number of cases - - - -	1,551
<hr/>	

in respect of which a total of 17,577 visits were made.

## PROVISION OF NURSING EQUIPMENT AND APPARATUS

The Medical Loan Depot is housed at the Health Centre and continues to have heavy demands made on it. During the summer months the demand for invalid chairs is so great that there is often a waiting list for them. Several of the cases who kept invalid chairs for long periods have been supplied with a chair of their own through the National Health Service, but still the demand keeps increasing. It is hoped that before next summer the stock of invalid chairs will be increased by six. The stock of other articles are maintained and replaced according to demand.

				On Payment	On Free Loan
Invalid chairs	-	-	-	74	—
Air Rings	-	-	-	147	—
Waterproof Sheets	-	-	-	131	1
Bed Pans	-	-	-	132	2
Bed Rests	-	-	-	100	2
Bed Slippers	-	-	-	56	—
Crutches (Pairs)	-	-	-	17	—
Urinals	-	-	-	47	—
Air Beds	-	-	-	1	—
Bed Cradles	-	-	-	8	1
Bed Tables	-	-	-	1	—
Mattresses	-	-	-	1	—
Inhalers	-	-	-	—	—
Walking Sticks	-	-	-	—	—
Feeding Cups	-	-	-	1	—
Diet Spring Balances	-	-	-	—	—
Electric Blankets	-	-	-	1	—

				£	s.	d.
Hire payments received on appliances during						
year ended 31/12/53	-	-	-	85	19	9
Hire payments received on appliances during						
year ended 31/12/52	-	-	-	84	12	8

### DOMESTIC HELP

Number of domestic helps on books at the end  
of the year - - - - 30

Number of householders helped during the year:—

(a) Maternity cases	-	-	-	95
(b) Other cases	-	-	-	176
Total				271







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